




AMMIS Reference User Manual (Part I)

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Table of Contents

Table of Contents	2
1. Document control.....	35
1.1 Document Information Page	35
1.2 Amendment History	35
1.3 Related Documentation.....	38
2. Reference Data Maintenance Introduction	39
2.1 Reference Data Maintenance User Manual Overview.....	39
2.2 Reference Data Maintenance User Manual Objective.....	39
3. Reference Data Maintenance Overview	40
3.1 Introduction to Reference Data Maintenance	40
4. Reference Data Maintenance System Navigation.....	41
4.1 Overview	41
4.2 System Security	41
4.3 Logging In/Logging Out	41
4.3.1 Logging into the interChange System.....	41
4.3.2 Logging out of the interChange System	42
4.3.3 To Set System Text Size	43
4.4 Changing Passwords	43
5. System Wide Common Terminology and Layouts.....	44
5.1 Page Layout	45
5.2 Shortcut Keys.....	46
5.3 Search Options	47
5.3.1 Search Panels	47
5.3.2 Search Results	47
5.3.3 Mini Search.....	47
5.3.4 Pop Up Search.....	48
5.4 Panel Layout	48
5.4.1 Panel Type and Functions.....	48
5.4.2 Maintenance Panel	49
5.4.3 Task List Panel.....	50
5.4.4 Maintenance Item Panel.....	51
5.4.5 Audit Panel.....	51
5.5 Help Functionality	52
5.5.1 Question Mark Icon 	52
5.5.1.1 Panel Help Feature - Question Mark Function Description.....	52
5.5.2 Field Level Help	53
5.5.2.1 Field Level Help Description.....	53
6. Reference Data Maintenance Pages/Panels	54
6.1 Reference Diagnosis Search Panel.....	55
6.1.1 Reference Diagnosis Search Panel Narrative	55
6.1.2 Reference Diagnosis Search Panel Layout	55
6.1.3 Reference Diagnosis Search Panel Field Descriptions	55
6.1.4 Reference Diagnosis Search Panel Field Edits	56
6.1.5 Reference Diagnosis Search Panel Extra Features	56
6.1.6 Reference Diagnosis Search Panel Accessibility.....	56

6.1.6.1	To Access the Reference Diagnosis Search Panel	56
6.2	Reference Diagnosis Search Results Panel	57
6.2.1	Reference Diagnosis Search Results Panel Narrative	57
6.2.2	Reference Diagnosis Search Results Panel Layout	57
6.2.3	Reference Diagnosis Search Results Panel Field Descriptions	57
6.2.4	Reference Diagnosis Search Results Panel Field Edits	58
6.2.5	Reference Diagnosis Search Results Panel Extra Features	58
6.2.6	Reference Diagnosis Search Results Panel Accessibility	58
6.2.6.1	To Access the Reference Diagnosis Search Results Panel	58
6.3	Diagnosis Search Panel	59
6.3.1	Diagnosis Search Panel Narrative	59
6.3.2	Diagnosis Search Panel Layout	59
6.3.3	Reference Diagnosis Search Results Panel Field Descriptions	59
6.3.4	Reference Diagnosis Search Results Panel Field Edits	60
6.3.5	Reference Diagnosis Search Results Panel Extra Features	60
6.3.6	Diagnosis Search Panel Accessibility	60
6.3.6.1	To Access the Diagnosis Search Panel	60
6.4	Diagnosis Information Panel	61
6.4.1	Diagnosis Information Panel Narrative	61
6.4.2	Diagnosis Information Panel Layout	61
6.4.3	Diagnosis Information Panel Field Descriptions	61
6.4.4	Diagnosis Information Panel Field Edits	61
6.4.5	Diagnosis Information Panel Extra Features	61
6.4.6	Diagnosis Information Panel Accessibility	62
6.4.6.1	To Access the Diagnosis Information Panel	62
6.5	Diagnosis Maintenance Panel	63
6.5.1	Diagnosis Maintenance Panel Narrative	63
6.5.2	Diagnosis Maintenance Panel Layout	63
6.5.3	Diagnosis Maintenance-Diagnosis Panel Field Descriptions	63
6.5.4	Diagnosis Maintenance Panel Field Edits	64
6.5.5	Diagnosis Maintenance Panel Extra Features	64
6.5.6	Diagnosis Maintenance Panel Accessibility	64
6.5.6.1	To Access the Diagnosis Maintenance Panel	64
6.6	Diagnosis Mini Search Panel	65
6.6.1	Diagnosis Mini Search Panel Narrative	65
6.6.2	Diagnosis Mini Search Panel Layout	65
6.6.3	Diagnosis Mini Search Panel Field Descriptions	65
6.6.4	Diagnosis Mini Search Panel Field Edits	65
6.6.5	Diagnosis Mini Search Panel Extra Features	65
6.6.6	Diagnosis Mini Search Panel Accessibility	66
6.6.6.1	To Access the Diagnosis Mini Search Panel	66
6.7	Base Information-Diagnosis Panel	67
6.7.1	Base Information-Diagnosis Panel Narrative	67
6.7.2	Base Information-Diagnosis Panel Layout	67
6.7.3	Base Information-Diagnosis Panel Field Descriptions	67
6.7.4	Base Information-Diagnosis Panel Field Edits	67

6.7.5	Base Information-Diagnosis Panel Extra Features	68
6.7.6	Base Information-Diagnosis Panel Accessibility.....	68
6.7.6.1	To Access the Base Information-Diagnosis Panel.....	68
6.7.6.2	To Add on the Base Information-Diagnosis Panel	68
6.7.6.3	To Delete on the Base Information-Diagnosis Panel.....	68
6.8	Benefit Plan Coverage Rules-Diagnosis Panel	69
6.8.1	Benefit Plan Coverage Rules-Diagnosis Panel Narrative	69
6.8.2	Benefit Plan Coverage Rules-Diagnosis Panel Layout.....	69
6.8.3	Benefit Plan Coverage Rules-Diagnosis Panel Field Descriptions.....	69
6.8.4	Benefit Plan Coverage Rules-Diagnosis Panel Field Edits.....	70
6.8.5	Benefit Plan Coverage Rules-Diagnosis Panel Extra Features	70
6.8.6	Benefit Plan Coverage Rules-Diagnosis Panel Accessibility	70
6.8.6.1	To Access the Benefit Plan Coverage Rules-Diagnosis Panel	70
6.9	Contract Billing Rules-Diagnosis Panel	71
6.9.1	Contract Billing Rules-Diagnosis Panel Narrative	71
6.9.2	Contract Billing Rules-Diagnosis Panel Layout	71
6.9.3	Contract Billing Rules-Diagnosis Panel Field Descriptions.....	71
6.9.4	Contract Billing Rules-Diagnosis Panel Field Edits.....	72
6.9.5	Contract Billing Rules-Diagnosis Panel Extra Features	72
6.9.6	Contract Billing Rules-Diagnosis Panel Accessibility	72
6.9.6.1	To Access the Contract Billing Rules-Diagnosis Panel.....	72
6.10	Group-Diagnosis Panel	73
6.10.1	Group-Diagnosis Panel Narrative	73
6.10.2	Group-Diagnosis Panel Layout.....	73
6.10.3	Group-Diagnosis Panel Field Descriptions.....	73
6.10.4	Group-Diagnosis Panel Field Edits.....	74
6.10.5	Group-Diagnosis Panel Extra Features	74
6.10.6	Group-Diagnosis Panel Accessibility	74
6.10.6.1	To Access the Group-Diagnosis Panel	74
6.11	Note-Diagnosis Panel.....	75
6.11.1	Note-Diagnosis Panel Narrative	75
6.11.2	Note-Diagnosis Panel Layout	75
6.11.3	Note-Diagnosis Panel Field Descriptions	75
6.11.4	Note-Diagnosis Panel Field Edits	76
6.11.5	Note-Diagnosis Panel Extra Features	76
6.11.6	Note-Diagnosis Panel Accessibility.....	76
6.11.6.1	To Access the Note-Diagnosis Panel.....	76
6.11.6.2	To Add on the Note-Diagnosis Panel	76
6.11.6.3	To Update on the Note-Diagnosis Panel.....	76
6.11.6.4	To Delete on the Note-Diagnosis Panel.....	76
6.12	Reimbursement Rules-Diagnosis Panel	78
6.12.1	Reimbursement Rules- Diagnosis Panel Narrative.....	78
6.12.2	Reimbursement Rules- Diagnosis Panel Layout.....	78
6.12.3	Reimbursement Rules- Diagnosis Panel Field Descriptions	78
6.12.4	Reimbursement Rules- Diagnosis Panel Field Edits	78
6.12.5	Reimbursement Rules- Diagnosis Panel Extra Features.....	79

6.12.6	Reimbursement Rules- Diagnosis Panel Accessibility	79
6.12.6.1	To Access the Reimbursement Rules- Diagnosis Panel	79
6.13	Restriction-Diagnosis Panel.....	80
6.13.1	Restriction-Diagnosis Panel Narrative.....	80
6.13.2	Restriction-Diagnosis Panel Layout	80
6.13.3	Restriction-Diagnosis Panel Field Descriptions	80
6.13.4	Restriction-Diagnosis Panel Field Edits	81
6.13.5	Restriction-Diagnosis Panel Extra Features.....	82
6.13.6	Restriction-Diagnosis Panel Accessibility.....	82
6.13.6.1	To Access the Restriction –Diagnosis Panel	82
6.13.6.2	To Add on the Restriction-Diagnosis Panel.....	83
6.13.6.3	To Update on the Restriction-Diagnosis Panel	83
6.13.6.4	To Delete on the Restriction-Diagnosis Panel	83
6.14	Reference Drug Search Panel	84
6.14.1	Reference Drug Search-Panel Narrative.....	84
6.14.2	Reference Drug Search Panel Layout	84
6.14.3	Reference Drug Search Panel Field Descriptions.....	84
6.14.4	Reference Drug Search Panel Field Edits	88
6.14.5	Reference Drug Search Panel Extra Features	88
6.14.6	Reference Drug Search Panel Accessibility	88
6.14.6.1	To Access the Reference Drug Search Panel.....	88
6.15	Reference Drug Search Results Panel.....	90
6.15.1	Reference Drug Search Results Panel Narrative	90
6.15.2	Reference Drug Search Results Panel Layout	90
6.15.3	Reference Drug Search Results Panel Field Descriptions	90
6.15.4	Reference Drug Search Results Panel Field Edits	91
6.15.5	Reference Drug Search Results Panel Extra Features	91
6.15.6	Reference Drug Search Results Panel Accessibility.....	91
6.15.6.1	To Access the Reference Drug Search Results Panel	91
6.15.6.2	To Navigate the Reference Drug Search Results Panel.....	91
6.14	Reference DRG Search and DRG Search Result-DRG Panel	93
6.14.1	Reference DRG Search and DRG Search Result-DRG Panel Narrative.....	93
6.14.2	Reference DRG Search and DRG Search Result-DRG Panel Layout.....	93
6.14.3	Reference DRG Search and DRG Search Results - DRG Panel Field Descriptions.....	93
6.14.4	Reference DRG Search-DRG Panel Field Edits.....	94
6.14.5	Reference DRG Search-DRG Panel Extra Features	94
6.14.6	Reference DRG Search-DRG Panel Accessibility	94
6.14.7	To Access the Reference Search DRG and Search Results-DRG Panel	94
6.15	DRG Information-DRG Panel	95
6.15.1	DRG Information-DRG Panel Narrative	95
6.15.2	DRG Information-DRG Panel Layout	95
6.15.3	DRG Information-DRG Panel Field Descriptions.....	95
6.15.4	DRG Information-DRG Panel Field Edits.....	95
6.15.5	DRG Information-DRG Panel Extra Features	95
6.15.6	DRG Information-DRG Panel Accessibility	96
6.15.6.1	To Access the DRG Information-DRG Panel.....	96

6.16	DRG Maintenance-DRG Panel.....	97
6.16.1	DRG Maintenance-DRG Panel Narrative.....	97
6.16.2	DRG Maintenance-DRG Panel Layout	97
6.16.3	DRG Maintenance-DRG Panel Field Descriptions	97
6.16.4	DRG Maintenance-DRG Panel Field Edits	97
6.16.5	DRG Maintenance-DRG Panel Extra Features.....	97
6.16.6	DRG Maintenance-DRG Panel Accessibility	98
6.16.6.1	To Access the DRG Maintenance-DRG Panel	98
6.17	DRG Mini Search-DRG Panel.....	99
6.17.1	DRG Mini Search-DRG Panel Narrative.....	99
6.17.2	DRG Mini Search-DRG Panel Layout	99
6.17.3	DRG Mini Search-DRG Panel Field Descriptions	99
6.17.4	DRG Mini Search-DRG Panel Field Edits	99
6.17.5	DRG Mini Search-DRG Panel Extra Features.....	99
6.17.6	DRG Mini Search-DRG Panel Accessibility	99
6.17.6.1	To Access the DRG Mini Search-DRG Panel	99
6.17.6.2	To Navigate the DRG Mini Search-DRG Panel	100
6.18	Base Information-DRG Panel.....	101
6.18.1	Base Information-DRG Panel Narrative	101
6.18.2	Base Information-DRG Panel Layout.....	101
6.18.3	Base Information-DRG Panel Field Descriptions.....	101
6.18.4	Base Information-DRG Panel Field Edits.....	101
6.18.5	Base Information-DRG Panel Extra Features	101
6.18.6	Base Information-DRG Panel Accessibility	102
6.18.6.1	To Access the Base Information-DRG Panel	102
6.18.6.2	To Add on the Base Information-DRG Panel.....	102
6.18.6.3	To Update on the Base Information-DRG Panel	102
6.18.6.4	To Delete on the Base Information-DRG Panel	102
6.19	Drug Maintenance Panel.....	103
6.19.1	Drug Maintenance Panel Narrative.....	103
6.19.2	Drug Maintenance Panel Layout	103
6.19.3	Drug Maintenance Panel Field Descriptions	103
6.19.4	Drug Maintenance Panel Field Edits	104
6.19.5	Drug Maintenance Panel Extra Features.....	105
6.19.6	Drug Maintenance Panel Accessibility	105
6.19.6.1	To Access the Drug Maintenance Panel	105
6.19.6.2	To Navigate on the Drug Maintenance Panel	105
6.20	Drug Mini Search-Drug Panel	106
6.20.1	Drug Mini Search-Drug Panel Narrative	106
6.20.2	Drug Mini Search-Drug Panel Layout.....	106
6.20.3	Drug Mini Search-Drug Panel Field Descriptions.....	106
6.20.4	Drug Mini Search-Drug Panel Field Edits.....	106
6.20.5	Drug Mini Search-Drug Panel Extra Features	106
6.20.6	Drug Mini Search-Drug Panel Accessibility	107
6.20.6.1	To Access the Drug Mini Search-Drug Panel.....	107
6.20.6.2	To Navigate on the Drug Mini Search-Drug Panel	107

6.21	Reference Drug Information Panel	108
6.21.1	Reference Drug Information Panel Narrative	108
6.21.2	Reference Drug Information Panel Layout	108
6.21.3	Reference Drug Information Panel Field Descriptions	109
6.21.4	Reference Drug Information Panel Field Edits	119
6.21.5	Reference Drug Information Panel Extra Features	119
6.21.6	Reference Drug Information Panel Accessibility	120
6.21.6.1	To Access Reference Drug Information Panel	120
6.22	AAC Rate-Drug Panel	121
6.22.1	AAC Rate-Drug Panel Narrative	121
6.22.2	AAC Rate-Drug Panel Layout	121
6.22.3	AAC Rate-Drug Panel Field Descriptions	121
6.22.4	AAC Rate-Drug Panel Field Edits	122
6.22.5	AAC Rate-Drug Panel Extra Features	123
6.22.6	AAC Rate-Drug Panel Accessibility	123
6.22.6.1	To Access the AAC Rate-Drug Panel	123
6.22.6.2	To Add on the AAC Rate-Drug Panel	123
6.22.6.3	To Update on the AAC Rate-Drug Panel	124
6.22.6.4	To Delete on the AAC Rate-Drug Panel	124
6.23	Drug – MME Panel	125
6.23.1	Drug - MME Panel Narrative	125
6.23.2	Drug – MME Panel Layout	125
6.23.3	Drug - MME Panel Field Descriptions	125
6.23.4	Drug - MME Panel Field Edits	125
6.23.5	Drug - MME Panel Extra Features	126
6.23.6	Drug - MME Panel Accessibility	126
6.23.6.1	To Access the Drug - MME Panel	126
6.24	Associated Audits-GCN Sequence Number-Drug Panel	127
6.24.1	Associated Audits-GCN Sequence Number-Drug Panel Narrative	127
6.24.2	Associated Audits-GCN Sequence Number-Drug Panel Layout	127
6.24.3	Associated Audits-GCN Sequence Number-Drug Panel Field Descriptions	127
6.24.4	Associated Audits-GCN Sequence Number-Drug Panel Field Edits	127
6.24.5	Associated Audits-GCN Sequence Number-Drug Panel Extra Features	128
6.24.6	Associated Audits-GCN Sequence Number-Drug Panel Accessibility	128
6.24.6.1	To Access the Associated Audits-GCN Sequence Number-Drug Panel	128
6.25	Associated Audits-NDC-Drug Panel	129
6.25.1	Associated Audits-NDC-Drug Panel Narrative	129
6.25.2	Associated Audits-NDC-Drug Panel Layout	129
6.25.3	Associated Audits-NDC-Drug Panel Field Descriptions	129
6.25.4	Associated Audits-NDC-Drug Panel Field Edits	129
6.25.5	Associated Audits-NDC-Drug Panel Extra Features	129
6.25.6	Associated Audits-NDC-Drug Panel Accessibility	130
6.25.6.1	To Access the Associated Audits-NDC Drug Panel	130
6.26	Associated Audits-Standard Therapeutic Class-Drug Panel	131
6.26.1	Associated Audits-Standard Therapeutic Class-Drug Panel Narrative	131
6.26.2	Associated Audits-Standard Therapeutic Class-Drug Panel Layout	131

6.26.3	Associated Audits-Standard Therapeutic Class-Drug Panel Field Descriptions ...	131
6.26.4	Associated Audits-Standard Therapeutic Class-Drug Panel Field Edits	131
6.26.5	Associated Audits-Standard Therapeutic Class-Drug Panel Extra Features	132
6.26.6	Associated Audits-Standard Therapeutic Class-Drug Panel Accessibility.....	132
6.26.6.1	To Access the Audits- Standard Therapeutic Class-Drug Panel	132
6.27	AWP Rate-Drug Panel.....	133
6.27.1	AWP Rate-Drug Panel Narrative.....	133
6.27.2	AWP Rate-Drug Panel Layout.....	133
6.27.3	AWP Rate-Drug Panel Field Descriptions	133
6.27.4	AWP Rate-Drug Panel Field Edits	134
6.27.5	AWP Rate-Drug Panel Extra Features.....	135
6.27.6	AWP Rate-Drug Panel Accessibility	135
6.27.6.1	To Access the AWP Rate-Drug Panel	135
6.27.6.2	To Add on the AWP Rate-Drug Panel.....	135
6.27.6.3	To Update on the AWP Rate-Drug Panel	136
6.27.6.4	To Delete on the AWP Rate-Drug Panel	136
6.28	Base Information-Drug Panel	137
6.28.1	Base Information-Drug Panel Narrative	137
6.28.2	Base Information-Drug Panel Layout	138
6.28.3	Base Information-Drug Panel Field Descriptions.....	138
6.28.4	Base Information-Drug Panel Field Edits.....	148
6.28.5	Base Information-Drug Panel Extra Features	150
6.28.6	Base Information-Drug Panel Accessibility	150
6.28.6.1	To Access the Base Information-Drug Panel.....	150
6.28.6.2	To Update on the Base Information-Drug Panel	151
6.29	Benefit Plan Coverage Rules-Drug Panel.....	152
6.29.1	Benefit Plan Coverage Rules-Drug Panel Narrative.....	152
6.29.2	Benefit Plan Coverage Rules-Drug Panel.....	152
6.29.3	Benefit Plan Coverage Rules- Drug Panel Field Descriptions	152
6.29.4	Benefit Plan Coverage Rules- Drug Panel Field Edits	153
6.29.5	Benefit Plan Coverage Rules- Drug Panel Extra Features.....	153
6.29.6	Benefit Plan Coverage Rules- Drug Panel Accessibility.....	153
6.29.6.1	To Access the Benefit Plan Coverage Rules-Drug Panel	153
6.30	Contract Billing Rules-Drug Panel	154
6.30.1	Contract Billing Rules- Drug Panel Narrative	154
6.30.2	Contract Billing Rules- Drug Panel Layout.....	154
6.30.3	Contract Billing Rules- Drug Panel Field Descriptions.....	154
6.30.4	Contract Billing Rules- Drug Panel Field Edits.....	155
6.30.5	Contract Billing Rules- Drug Panel Extra Features	155
6.30.6	Contract Billing Rules- Drug Panel Accessibility	155
6.30.6.1	To Access the Contract Billing Rules-Drug Panel	155
6.31	DESI-Drug Panel	156
6.31.1	DESI-Drug Panel Narrative	156
6.31.2	DESI-Drug Panel Layout.....	156
6.31.3	DESI-Drug Panel Field Descriptions.....	156
6.31.4	DESI-Drug Panel Field Edits.....	157

6.31.5	DESI-Drug Panel Extra Features	157
6.31.6	DESI-Drug Panel Accessibility	158
6.31.6.1	To Access the DESI-Drug Panel.....	158
6.31.6.2	To Add on the DESI-Drug Panel	158
6.31.6.3	To Update on the DESI-Drug Panel	158
6.31.6.4	To Delete on the DESI-Drug Panel	158
6.32	Drug Group-Drug Panel.....	159
6.32.1	Drug Group-Drug Panel Narrative.....	159
6.32.2	Drug Group-Drug Panel Layout	159
6.32.3	Drug Group-Drug Panel Field Descriptions	159
6.32.4	Drug Group-Drug Panel Field Edits	159
6.32.5	Drug Group-Drug Panel Extra Features	159
6.32.6	Drug Group-Drug Panel Accessibility.....	160
6.32.6.1	To Access the Drug Group-Drug Panel	160
6.33	Drug Rejection Criteria-Drug Panel	161
6.33.1	Drug Rejection Criteria-Drug Panel Overview.....	161
6.33.2	Drug Rejection Criteria-Drug Panel Layout	161
6.33.3	Drug Rejection Criteria-Drug Panel Field Descriptions.....	161
6.33.4	Drug Rejection Criteria-Drug Panel Field Edits	162
6.33.5	Drug Rejection Criteria-Drug Panel Extra Features	162
6.33.6	Drug Rejection Criteria-Drug Panel Accessibility	163
6.33.6.1	To Access the Drug Reject Criteria-Drug Panel.....	163
6.34	Federal MAC Rate-Drug Panel.....	164
6.34.1	Federal MAC Rate-Drug Panel Narrative.....	164
6.34.2	Federal MAC Rate-Drug Panel Layout	164
6.34.3	Federal MAC Rate-Drug Panel Field Descriptions	164
6.34.4	Federal MAC Rate-Drug Panel Field Edits	165
6.34.5	Federal MAC Rate-Drug Panel Extra Features	166
6.34.6	Federal MAC Rate-Drug Panel Accessibility	166
6.34.6.1	To Access the Federal MAC Rate-Drug Panel	166
6.34.6.2	To Add on the Federal MAC Rate-Drug Panel	166
6.34.6.3	To Update on the Federal MAC Rate-Drug Panel.....	166
6.34.6.4	To Delete on the Federal MAC Rate-Drug Panel	166
6.35	Generic Drug-Drug Panel	168
6.35.1	Generic Drug-Drug Panel Narrative	168
6.35.2	Generic Drug-Drug Panel Layout	168
6.35.3	Generic Drug-Drug Panel Field Descriptions.....	168
6.35.4	Generic Drug-Drug Panel Field Edits.....	170
6.35.5	Generic Drug-Drug Panel Extra Features	170
6.35.6	Generic Drug-Drug Panel Accessibility	170
6.35.6.1	To Access the Generic Drug-Drug Panel.....	170
6.36	HCPCS Procedure-Drug Panel	171
5.29.1	HCPCS Procedure-Drug Panel Narrative	171
5.29.2	HCPCS Procedure-Drug Panel Layout	171
5.29.3	HCPCS Procedure-Drug Panel Field Descriptions.....	171
6.36.1	HCPCS Procedure-Drug Panel Field Edits.....	172

6.36.2	HCPCS Procedure-Drug Panel Extra Features	172
6.36.3	HCPCS Procedure-Drug Panel Accessibility	172
6.36.3.1	To Access the HCPCS Procedure-Drug Panel.....	172
6.37	Ingredients-Drug Panel	173
6.37.1	Ingredients-Drug Panel Narrative	173
6.37.2	Ingredients-Drug Panel Ingredients-Drug Layout	173
6.37.3	Ingredients-Drug Panel Field Descriptions.....	173
6.37.4	Ingredients-Drug Panel Field Edits.....	173
6.37.5	Ingredients-Drug Panel Extra Features	173
6.37.6	Ingredients-Drug Panel Accessibility	173
6.37.6.1	To Access the Ingredients -Drug Panel	173
6.38	Labeler Rebate Status-Drug Panel	175
6.38.1	Labeler Rebate Status-Drug Panel Narrative	175
6.38.2	Labeler Rebate Status-Drug Panel Layout.....	175
6.38.3	Labeler Rebate Status-Drug Panel Field Descriptions.....	175
6.38.4	Labeler Rebate Status-Drug Panel Field Edits.....	175
6.38.5	Labeler Rebate Status-Drug Panel Extra Features	175
6.38.6	Labeler Rebate Status-Drug Panel Accessibility	176
6.38.6.1	To Access the Labeler Rebate Status-Drug Panel	176
6.39	Note-Drug Panel	177
6.39.1	Note-Drug Panel Narrative	177
6.39.2	Note-Drug Panel Note-Drug Layout.....	177
6.39.3	Note-Drug Panel Field Descriptions	177
6.39.4	Note-Drug Panel Field Edits	178
6.39.5	Note-Drug Panel Extra Features	178
6.39.6	Note-Drug Panel Accessibility	178
6.39.6.1	To Access the Note-Drug Panel.....	178
6.39.6.2	To Add on the Note-Drug Panel	178
6.39.6.3	To Update on the Note-Drug Panel	178
6.39.6.4	To Delete on the Note-Drug Panel.....	179
6.40	Other Rates-Drug Panel	180
6.40.1	Other Rates-Drug Panel Narrative	180
6.40.2	Other Rates-Drug Panel Layout.....	180
6.40.3	Other Rates-Drug Panel Field Descriptions.....	180
6.40.4	Other Rates-Drug Panel Field Edits.....	182
6.40.5	Other Rates-Drug Panel Extra Features	182
6.40.6	Other Rates-Drug Panel Accessibility	182
6.40.6.1	To Access the Other Rates-Drug Panel	182
6.40.6.2	To Add on the Other Rates-Drug Panel.....	183
6.40.6.3	To Update on the Other Rates-Drug Panel	183
6.40.6.4	To Delete on the Other Rates-Drug Panel	183
6.41	PDL History Panel	184
6.41.1	PDL History Panel Narrative	184
6.41.2	PDL History Panel Layout.....	184
6.41.3	PDL History Panel Field Descriptions.....	184
6.41.4	PDL History Panel Field Edits.....	185

6.41.5	PDL History Panel Extra Features	185
6.41.6	PDL History Panel Accessibility	185
6.41.6.1	To Access the PDL History Panel	185
6.42	Price Update Indicators Panel	186
6.42.1	Price Update Indicators Panel Narrative.....	186
6.42.2	Price Update Indicators Panel Layout.....	186
6.42.3	Price Update Indicators Panel Field Descriptions	186
6.42.4	Price Update Indicators Panel Field Edit Error Codes.....	186
6.42.5	Price Update Indicators Panel Extra Features.....	186
6.42.6	Price Update Indicators Panel Accessibility	187
6.42.6.1	To Access the Price Update Indicators Panel	187
6.42.6.2	To Add on the Price Update Indicators Panel.....	187
6.42.6.3	To Update on the Price Update Indicators Panel	187
6.43	Pricing-Drug Panel.....	188
6.43.1	Pricing-Drug Panel Narrative	188
6.43.2	Pricing-Drug Panel Layout	188
6.43.3	Pricing-Drug Panel Field Descriptions	189
6.43.4	Pricing-Drug Panel Field Edits	191
6.43.5	Pricing-Drug Panel Extra Features	191
6.43.6	Pricing-Drug Panel Accessibility.....	191
6.43.6.1	To Access the Pricing-Drug Panel	191
6.44	Reimbursement Rules-Drug Panel.....	193
6.44.1	Reimbursement Rules- Drug Panel Narrative.....	193
6.44.2	Reimbursement Rules- Drug Panel Layout	193
6.44.3	Reimbursement Rules- Drug Panel Field Descriptions	193
6.44.4	Reimbursement Rules- Drug Panel Field Edits	194
6.44.5	Reimbursement Rules- Drug Panel Extra Features	194
6.44.6	Reimbursement Rules- Drug Panel Accessibility.....	194
6.44.6.1	To Access the Reimbursement Rules-Drug Panel	194
6.45	Restrictions Maintenance-Drug Panel	195
6.45.1	Restrictions Maintenance-Drug Panel Narrative	195
6.45.2	Restrictions Maintenance-Drug Panel Layout	195
6.45.3	Restrictions Maintenance-Drug Panel Field Descriptions.....	195
6.45.4	Restrictions Maintenance-Drug Panel Field Edits	197
6.45.5	Restrictions Maintenance-Drug Panel Extra Features	198
6.45.6	Restrictions Maintenance-Drug Panel Accessibility	199
6.45.6.1	To Access the Restrictions Maintenance-Drug Panel.....	199
6.45.6.2	To Add on the Restrictions Maintenance-Drug Panel	199
6.45.6.3	To Update on the Restrictions Maintenance-Drug Panel	200
6.45.6.4	To Delete on the Restrictions Maintenance-Drug Panel.....	200
6.46	State MAC Rate-Drug Panel.....	201
6.46.1	State MAC Rate-Drug Panel Narrative.....	201
6.46.2	State MAC Rate-Drug Panel Layout	201
6.46.3	State MAC Rate-Drug Panel Field Descriptions	201
6.46.4	State MAC-Drug Panel Field Edits.....	202
6.46.5	State MAC Rate-Drug Panel Extra Features	203

6.46.6	State MAC Rate-Drug Panel Accessibility	203
6.46.6.1	To Access the State MAC Rate-Drug Panel	203
6.46.6.2	To Add on the State MAC Rate-Drug Panel	203
6.46.6.3	To Update on the State MAC-Drug Panel	204
6.46.6.4	To Delete on the State MAC-Drug Panel	204
6.47	Reference Error Disposition Search-Error Disposition Panel	205
6.47.1	Reference Error Disposition Search-Error Disposition Panel Narrative	205
6.47.2	Reference Error Disposition Search-Error Disposition Panel Layout	205
6.47.3	Reference Error Disposition Search-Error Disposition Panel Field Descriptions	205
6.47.4	Reference Error Disposition Search-Error Disposition Panel Field Edits	206
6.47.5	Reference Error Disposition Search-Error Disposition Panel Extra Features	206
6.47.6	Reference Error Disposition Search-Error Disposition Panel Accessibility	206
6.47.6.1	To Access the Reference Error Disposition Search-Error Disposition Panel	206
6.48	Reference Error Disposition Search Results Panel	207
6.48.1	Reference Error Disposition Search Results Panel Narrative	207
6.48.2	Reference Error Disposition Search Results Panel Layout	207
6.48.3	Reference Error Disposition Search Results Panel Field Descriptions	207
6.48.4	Reference Error Disposition Search Results Panel Field Edits	208
6.48.5	Reference Error Disposition Search Results Panel Extra Features	208
6.48.6	Reference Error Disposition Search Results Panel Accessibility	208
6.48.6.1	To Access the Reference Error Disposition Search Results Panel	208
6.49	Error Disposition Information-Error Disposition Panel	209
6.49.1	Error Disposition Information-Error Disposition Panel Narrative	209
6.49.2	Error Disposition Information-Error Disposition Panel Layout	209
6.49.3	Error Disposition Information-Error Disposition Panel Field Descriptions	209
6.49.4	Error Disposition Information-Error Disposition Panel Field Edits	210
6.49.5	Error Disposition Information-Error Disposition Panel Extra Features	211
6.49.6	Error Disposition Information-Error Disposition Panel Accessibility	211
6.49.6.1	To Access the Error Disposition Information-Error Disposition Panel Accessibility	211
6.50	Error Disposition Maintenance-Error Disposition Panel	212
6.50.1	Error Disposition Maintenance-Error Disposition Panel Narrative	212
6.50.2	Error Disposition Maintenance-Error Disposition Panel Layout	212
6.50.3	Error Disposition Maintenance-Error Disposition Panel Field Descriptions	212
6.50.4	Error Disposition Maintenance-Error Disposition Panel Field Edits	218
6.50.5	Error Disposition Maintenance-Error Disposition Panel Extra Features	218
6.50.6	Error Disposition Maintenance-Error Disposition Panel Accessibility	218
6.50.6.1	To Access the Disposition Maintenance-Error Disposition Panel	218
6.50.6.2	To Navigate the Error Disposition Maintenance-Error Disposition Panel	218
6.51	Error Disposition Mini Search-Error Disposition Panel	219
6.51.1	Error Disposition Mini Search-Error Disposition Panel Narrative	219
6.51.2	Error Disposition Mini Search-Error Disposition Panel Layout	219
6.51.3	Error Disposition Mini Search-Error Disposition Panel Field Descriptions	219
6.51.4	Error Disposition Mini Search-Error Disposition Panel Field Edits	219
6.51.5	Error Disposition Mini Search-Error Disposition Panel Extra Features	219
6.51.6	Error Disposition Mini Search-Error Disposition Panel Accessibility	220

6.51.6.1	To Access the Error Disposition-Mini Search-Error Disposition Panel	220
6.51.6.2	To Navigate the Disposition-Mini Search-Error Disposition Panel	220
6.52	Adjustment Data Correction EOB-Error Disposition Panel	221
6.52.1	Adjustment Data Correction EOB-Error Disposition Panel Narrative	221
6.52.2	Adjustment Data Correction EOB-Error Disposition Panel Layout.....	221
6.52.3	Adjustment Data Correction EOB-Error Disposition Panel Field Descriptions....	221
6.52.4	Adjustment Data Correction EOB-Error Disposition Panel Field Edits.....	221
6.52.5	Adjustment Data Correction EOB-Error Disposition Panel Extra Features	222
6.52.6	Adjustment Data Correction EOB-Error Disposition Panel Accessibility	222
6.52.6.1	To Access the Adjustment Data Correction EOB Error Disposition Panel.....	222
6.52.6.2	To Add on the Adjustment Data Correction EOB-Error Disposition Panel	222
6.52.6.3	To Update on the Adjustment Data Correction EOB-Error Disposition Panel ..	222
6.52.6.4	To Delete on the Adjustment Data Correction EOB-Error Disposition Panel ..	223
6.53	Base Information-Error Disposition Panel.....	224
6.53.1	Base Information-Error Disposition Panel Narrative	224
6.53.2	Base Information-Error Disposition Panel Layout	224
6.53.3	Base Information-Error Disposition Panel Field Descriptions	224
6.53.4	Base Information-Error Disposition Panel Field Edits	226
6.53.5	Base Information-Error Disposition Panel Extra Features	226
6.53.6	Base Information-Error Disposition Panel Accessibility.....	226
6.53.6.1	To Access the Base Information-Error Disposition Panel	226
6.53.6.2	To Add on the Base Information-Error Disposition Panel	226
6.53.6.3	To Update on the Base Information-Error Disposition Panel.....	227
6.53.6.4	To Delete on the Base Information-Error Disposition Panel.....	228
6.54	Disposition Criteria-Error Disposition Panel.....	229
6.54.1	Disposition Criteria-Error Disposition Panel Narrative.....	229
6.54.2	Disposition Criteria-Error Disposition Panel Layout	229
6.54.3	Disposition Criteria-Error Disposition Panel Field Descriptions	229
6.54.4	Disposition Criteria-Error Disposition Panel Field Edits	231
6.54.5	Disposition Criteria-Error Disposition Panel Extra Features.....	231
6.54.6	Disposition Criteria-Error Disposition Panel Accessibility	232
6.54.6.1	To Access the Disposition Criteria- Error Disposition Panel	232
6.54.6.2	To Add on the Disposition Criteria- Error Disposition Panel.....	232
6.54.6.3	To Update on the Disposition Criteria-Error Disposition Panel	233
6.54.6.4	To Delete on the Disposition Criteria-Error Disposition Panel	233
6.55	Disposition Criteria-Region Data-Error Disposition Panel	234
6.55.1	Disposition Criteria-Region Data-Error Disposition Panel Narrative	234
6.55.2	Disposition Criteria-Region Data-Error Disposition Panel Layout	234
6.55.3	Disposition Criteria-Region Data-Error Disposition Panel Field Descriptions	234
6.55.4	Disposition Criteria-Region Data-Error Disposition Panel Field Edits.....	235
6.55.5	Disposition Criteria-Region Data-Error Disposition Panel Extra Features	235
6.55.6	Disposition Criteria-Region Data-Error Disposition Panel Accessibility	236
6.55.6.1	To Access the Disposition Criteria-Region Data-Error Disposition Panel.....	236
6.55.6.2	To Add on the Disposition Criteria-Region Data-Error Disposition Panel	236
6.55.6.3	To Update on the Disposition Criteria-Region Data-Error Disposition Panel ..	236
6.55.6.4	To Delete on the Disposition Criteria-Region Data-Error Disposition Panel....	237

6.56	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel	238
6.56.1	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Narrative	238
6.56.2	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Layout	238
6.56.3	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Field Descriptions	238
6.56.4	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Field Edits	239
6.56.5	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Extra Features	239
6.56.6	Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Accessibility.....	239
6.56.6.1	To Access the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel	239
6.56.6.2	To Add on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel	239
6.56.6.3	To Update on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel	240
6.56.6.4	To Delete on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel	240
6.57	NCPDP Response-Error Disposition Panel	241
6.57.1	NCPDP Response-Error Disposition Panel Narrative	241
6.57.2	NCPDP Response-Error Disposition Panel Layout.....	241
6.57.3	NCPDP Response-Error Disposition Panel Field Descriptions.....	241
6.57.4	NCPDP Response-Error Disposition Panel Field Edits.....	241
6.57.5	NCPDP Response-Error Disposition Panel Extra Features	241
6.57.6	NCPDP Response-Error Disposition Panel Accessibility	242
6.57.6.1	To Access the NCPDP Response-Error Disposition Panel.....	242
6.57.6.2	To Add on the NCPDP Response-Error Disposition Panel	242
6.57.6.3	To Delete on the NCPDP Response-Error Disposition Panel	242
6.58	Modification Log-Error Disposition Panel	243
6.58.1	Modification Log -Error Disposition Panel Narrative	243
6.58.2	Modification Log -Error Disposition Panel Note-Error Disposition Layout.....	243
6.58.3	Modification Log -Error Disposition Panel Field Descriptions.....	243
6.58.4	Modification Log -Error Disposition Panel Field Edits.....	244
6.58.5	Modification Log -Error Disposition Panel Extra Features	244
6.58.6	Modification Log -Error Disposition Panel Accessibility	244
6.58.6.1	To Access the Modification Log -Error Disposition Panel	244
6.58.6.2	To Add on the Modification Log -Error Disposition Panel	244
6.58.6.3	To Update on the Modification Log -Error Disposition Panel	245
6.59	Parameters-Error Disposition Panel.....	246
6.59.1	Parameters-Error Disposition Panel Narrative.....	246
6.59.2	Parameters-Error Disposition Panel Layout	246
6.59.3	Parameters-Error Disposition Panel Field Descriptions	246
6.59.4	Parameters-Error Disposition Panel Field Edits	247

6.59.5	Parameters-Error Disposition Panel Extra Features	248
6.59.6	Parameters-Error Disposition Panel Accessibility.....	248
6.59.6.1	To Access the Parameters-Error Disposition Panel	248
6.59.6.2	To Add on the Parameters-Error Disposition Panel	248
6.59.6.3	To Update on the Parameters-Error Disposition Panel.....	248
6.59.6.4	To Delete on the Parameters-Error Disposition Panel.....	248
6.60	Resolution Clarification-Error Disposition Panel.....	250
6.60.1	Resolution Clarification-Error Disposition Panel Narrative.....	250
6.60.2	Resolution Clarification-Error Disposition Panel Layout.....	250
6.60.3	Resolution Clarification-Error Disposition Panel Field Descriptions	250
6.60.4	Resolution Clarification-Error Disposition Panel Field Edits	250
6.60.5	Resolution Clarification-Error Disposition Panel Extra Features.....	251
6.60.6	Resolution Clarification-Error Disposition Panel Accessibility	251
6.60.6.1	To Access the Resolution Clarification-Error Disposition Panel	251
6.60.6.2	To Add on the Resolution Clarification-Error Disposition Panel.....	251
6.60.6.3	To Update on the Resolution Clarification-Error Disposition Panel.....	252
6.60.6.4	To Delete on the Resolution Clarification-Error Disposition Panel	252
6.61	Resolution Criteria-Error Disposition Panel.....	253
6.61.1	Resolution Criteria-Error Disposition Panel Narrative.....	253
6.61.2	Resolution Criteria-Error Disposition Panel Layout.....	253
6.61.3	Resolution Criteria-Error Disposition Panel Field Descriptions	253
6.61.4	Resolution Criteria-Error Disposition Panel Field Edits	253
6.61.5	Resolution Criteria-Error Disposition Panel Extra Features.....	253
6.61.6	Resolution Criteria-Error Disposition Panel Accessibility	254
6.61.6.1	To Access the Resolution Criteria-Error Disposition Panel	254
6.61.6.2	To Add on the Resolution Criteria-Error Disposition Panel.....	254
6.61.6.3	To Update on the Resolution Criteria-Error Disposition Panel.....	254
6.61.6.4	To Delete on the Resolution Criteria-Error Disposition Panel	254
6.62	Resolution Group-Error Disposition Panel.....	255
6.62.1	Resolution Group-Error Disposition Panel Narrative.....	255
6.62.2	Resolution Group-Error Disposition Panel Layout.....	255
6.62.3	Resolution Group-Error Disposition Panel Field Descriptions	255
6.62.4	Resolution Group-Error Disposition Panel Field Edits	256
6.62.5	Resolution Group-Error Disposition Panel Extra Features.....	257
6.62.6	Resolution Group-Error Disposition Panel Accessibility	257
6.62.6.1	To Access the Resolution Group-Error Disposition Panel	257
6.62.6.2	To Add on the Resolution Group-Error Disposition Panel.....	257
6.62.6.3	To Update on the Resolution Group-Error Disposition Panel.....	258
6.62.6.4	To Delete on the Resolution Group-Error Disposition Panel	258
6.63	Resolution Medical Policy-Error Disposition Panel.....	259
6.63.1	Resolution Medical Policy-Error Disposition Panel Narrative.....	259
6.63.2	Resolution Medical Policy-Error Disposition Panel Layout	259
6.63.3	Resolution Medical Policy-Error Disposition Panel Field Descriptions	259
6.63.4	Resolution Medical Policy-Error Disposition Panel Field Edits	259
6.63.5	Resolution Medical Policy-Error Disposition Panel Extra Features.....	259
6.63.6	Resolution Medical Policy-Error Disposition Panel Accessibility	260

6.63.6.1	To Access the Resolution Medical Policy-Error Disposition Panel	260
6.63.6.2	To Add on the Resolution Medical Policy-Error Disposition Panel.....	260
6.63.6.3	To Update on the Resolution Medical Policy-Error Disposition Panel.....	260
6.63.6.4	To Delete on the Resolution Medical Policy-Error Disposition Panel	260
6.64	Resolution Method of Correction-Error Disposition Panel	261
6.64.1	Resolution Method of Correction-Error Disposition Panel Narrative	261
6.64.2	Resolution Method of Correction-Error Disposition Panel Layout.....	261
6.64.3	Resolution Method of Correction-Error Disposition Panel Field Descriptions.....	261
6.64.4	Resolution Method of Correction-Error Disposition Panel Field Edits.....	261
6.64.5	Resolution Method of Correction-Error Disposition Panel Extra Features	261
6.64.6	Resolution Method of Correction-Error Disposition Panel Accessibility	262
6.64.6.1	To Access the Resolution Method of Correction-Error Disposition Panel.....	262
6.64.6.2	To Add on the Resolution Method of Correction-Error Disposition Panel	262
6.64.6.3	To Update on the Resolution Method of Correction -Error Disposition Panel .	262
6.64.6.4	To Delete on the Resolution Method of Correction-Error Disposition Panel ...	262
6.65	Resolution Note-Error Disposition Panel	263
6.65.1	Resolution Note-Error Disposition Panel Narrative	263
6.65.2	Resolution Note-Error Disposition Panel Layout	263
6.65.3	Resolution Note-Error Disposition Panel Field Descriptions	263
6.65.4	Resolution Note-Error Disposition Panel Field Edits	263
6.65.5	Resolution Note-Error Disposition Panel Extra Features	263
6.65.6	Resolution Note-Error Disposition Panel Accessibility	264
6.65.6.1	To Access the Resolution Note Error-Disposition Panel.....	264
6.65.6.2	To Add on the Resolution Note-Error Disposition Panel	264
6.65.6.3	To Update on the Resolution Note-Error Disposition Panel	264
6.65.6.4	To Delete on the Resolution Note-Error Disposition Panel.....	264
6.66	Resolution Status-Error Disposition Panel	265
6.66.1	Resolution Status-Error Disposition Panel Narrative	265
6.66.2	Resolution Status-Error Disposition Panel Layout	265
6.66.3	Resolution Status-Error Disposition Panel Field Descriptions	265
6.66.4	Resolution Status-Error Disposition Panel Field Edits	265
6.66.5	Resolution Status-Error Disposition Panel Extra Features	266
6.66.6	Resolution Status-Error Disposition Panel Accessibility	266
6.66.6.1	To Access the Resolution Status-Error Disposition Panel.....	266
6.66.6.2	To Add on the Resolution Status-Error Disposition Panel	266
6.66.6.3	To Update on the Resolution Status-Error Disposition Panel	266
6.66.6.4	To Delete on the Resolution Status-Error Disposition Panel.....	267
6.67	Error Disposition - Audit Criteria Page	268
6.67.1	Error Disposition-Audit Criteria Page Narrative	268
6.67.2	Error Disposition - Audit Criteria Page Layout	268
6.67.3	Error Disposition-Audit Criteria Page Field Descriptions.....	268
6.67.4	Error Disposition-Field Edit Error Codes	268
6.67.5	Error Disposition-Extra Features	268
6.67.6	Error Disposition-Audit Criteria Page Accessibility	268
6.67.6.1	To Access the Error Disposition-Audit Criteria Page.....	268
6.68	Audit Criteria Base-Error Disposition Panel	270

6.68.1	Audit Criteria Base-Error Disposition Panel Narrative	270
6.68.2	Audit Criteria Base-Error Disposition Panel Layout	270
6.68.3	Audit Criteria Base-Error Disposition Panel Field Descriptions	271
6.68.4	Audit Criteria Base-Error Disposition Panel Field Edits	276
6.68.5	Audit Criteria Base-Error Disposition Panel Extra Features	277
6.68.6	Audit Criteria Base-Error Disposition Panel Accessibility	277
6.68.6.1	To Access the Audit Criteria Base-Error Disposition Panel	277
6.68.6.2	To Add on the Audit Criteria Base-Error Disposition Panel	277
6.68.6.3	To Update on the Audit Criteria Base-Error Disposition Panel	279
6.68.6.4	To Delete on the Audit Criteria Base-Error Disposition Panel	279
6.69	Audit Parameters (Conflict)-Error Disposition Panel	280
6.69.1	Audit Parameters (Conflict)-Error Disposition Panel Narrative	280
6.69.2	Audit Parameters (Conflict)-Error Disposition Panel Layout	280
6.69.3	Audit Parameters (Conflict)-Error Disposition Panel Field Descriptions	280
6.69.4	Audit Parameters (Conflict)-Error Disposition Panel Field Edits	280
6.69.5	Audit Parameters (Conflict)-Error Disposition Panel Extra Features	281
6.69.6	Audit Parameters (Conflict)-Error Disposition Panel Accessibility	281
6.69.6.1	To Access the Audit Parameters (Conflict) -Error Disposition Panel	281
6.69.6.2	To Add on the Audit Parameters (Conflict)-Error Disposition Panel	281
6.69.6.3	To Update on the Audit Parameters (Conflict)-Error Disposition Panel	281
6.69.6.4	To Delete on the Audit Parameters (Conflict)-Error Disposition Panel	282
6.70	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel 283	
6.70.1	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Narrative	283
6.70.2	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Layout	283
6.70.3	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Field Descriptions	283
6.70.4	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Field Edits	284
6.70.5	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Extra Features	284
6.70.6	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Accessibility	284
6.70.6.1	To Access the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)- Error Disposition Panel	284
6.70.6.2	To Add on the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)- Error Disposition Panel	285
6.70.6.3	To Update on the Audit Parameters (Contra-Indicated-Negative Contra- Indicated)-Error Disposition Panel	285
6.70.6.4	To Delete on the Audit Parameters (Contra-Indicated-Negative Contra- Indicated)-Error Disposition Panel	286
6.71	Audit Parameters (Limitation)-Error Disposition Panel	287
6.71.1	Audit Parameters (Limitation)-Error Disposition Panel Narrative	287
6.71.2	Audit Parameters (Limitation)-Error Disposition Panel Layout	287

6.71.3	Audit Parameters (Limitation)-Error Disposition Panel Field Descriptions.....	287
6.71.4	Audit Parameters (Limitation)-Error Disposition Panel Field Edits.....	288
6.71.5	Audit Parameters (Limitation)-Error Disposition Panel Extra Features	289
6.71.6	Audit Parameters (Limitation)-Error Disposition Panel Accessibility	289
6.71.6.1	To Access the Audit Parameters (Limitation)-Error Disposition Panel	289
6.71.6.2	To Add on the Audit Parameters (Limitation)-Error Disposition Panel.....	290
6.71.6.3	To Update on the Audit Parameters (Limitation)-Error Disposition Panel	290
6.71.6.4	To Delete on the Audit Parameters (Limitation)-Error Disposition Panel	290
6.72	Error Disposition-Audit Restriction Page	291
6.72.1	Error Disposition-Audit Restriction Page Narrative	291
6.72.2	Error Disposition-Audit Restriction Page Layout.....	291
6.72.3	Error Disposition-Audit Restriction Page Field Descriptions	291
6.72.4	Error Disposition-Audit Restriction - Procedure Page Field Edit Error Codes	292
6.72.5	Error Disposition-Audit Restriction - Procedure Page Extra Features	292
6.72.6	Error Disposition-Audit Restriction - Procedure Page Accessibility	292
6.72.6.1	To Access the Error Disposition-Audit Restriction-Procedure Page.....	292
6.73	Audit Restriction-Age-Error Disposition Panel.....	293
6.73.1	Audit Restriction-Age-Error Disposition Panel Narrative.....	293
6.73.2	Audit Restriction-Age-Error Disposition Panel Layout	293
6.73.3	Audit Restriction-Age-Error Disposition Panel Field Descriptions	293
6.73.4	Audit Restriction-Age-Error Disposition Panel Field Edits	293
6.73.5	Audit Restriction-Age-Error Disposition Panel Extra Features.....	294
6.73.6	Audit Restriction-Age-Error Disposition Panel Accessibility	294
6.73.6.1	To Access the Audit Restriction-Age-Error Disposition Panel	294
6.73.6.2	To Add on the Audit Restriction-Age-Error Disposition Panel.....	294
6.73.6.3	To Update on the Audit Restriction-Age-Error Disposition Panel	294
6.73.6.4	To Delete on the Audit Restriction-Age-Error Disposition Panel	295
6.74	Audit Restriction-AHFS Class-Error Disposition Panel.....	296
6.74.1	Audit Restriction-AHFS Class-Error Disposition Panel Narrative	296
6.74.2	Audit Restriction-AHFS Class-Error Disposition Panel Layout	296
6.74.3	Audit Restriction-AHFS Class-Error Disposition Panel Field Descriptions	296
6.74.4	Audit Restriction-AHFS Class-Error Disposition Panel Field Edit Error Codes ..	296
6.74.5	Audit Restriction-AHFS Class-Error Disposition Panel Extra Features	296
6.74.6	Audit Restriction-AHFS Class-Error Disposition Panel Accessibility.....	297
6.74.6.1	To Access the Audit Restriction- AHFS Class -Error Disposition Panel.....	297
6.74.6.2	To Add on the Audit Restriction- AHFS Class -Error Disposition Panel	297
6.74.6.3	To Update on the Audit Restriction- AHFS Class -Error Disposition Panel.....	297
6.74.6.4	To Delete on the Audit Restriction- AHFS Class -Error Disposition Panel.....	297
6.75	Audit Restriction-Claim Type-Error Disposition Panel	298
6.75.1	Audit Restriction-Claim Type-Error Disposition Panel Narrative	298
6.75.2	Audit Restriction-Claim Type-Error Disposition Panel Layout	298
6.75.3	Audit Restriction-Claim Type-Error Disposition Panel Field Descriptions	298
6.75.4	Audit Restriction-Claim Type-Error Disposition Panel Field Edits	299
6.75.5	Audit Restriction-Claim Type-Error Disposition Panel Extra Features	299
6.75.6	Audit Restriction-Claim Type-Error Disposition Panel Accessibility.....	299
6.75.6.1	To Access the Audit Restriction- Claim Type-Error Disposition Panel.....	299

6.75.6.2	To Add on the Audit Restriction- Claim Type-Error Disposition Panel	300
6.75.6.3	To Update on the Audit Restriction- Claim Type-Error Disposition Panel.....	300
6.75.6.4	To Delete on the Audit Restriction- Claim Type-Error Disposition Panel.....	300
6.76	Audit Restriction-Diagnosis-Error Disposition Panel	301
6.76.1	Audit Restriction-Diagnosis-Error Disposition Panel Narrative	301
6.76.2	Audit Restriction-Diagnosis-Error Disposition Panel Layout	301
6.76.3	Audit Restriction-Diagnosis-Error Disposition Panel Field Descriptions	301
6.76.4	Audit Restriction-Diagnosis-Error Disposition Panel Field Edits	302
6.76.5	Audit Restriction-Diagnosis-Error Disposition Panel Extra Features	302
6.76.6	Audit Restriction-Diagnosis-Error Disposition Panel Accessibility.....	302
6.76.6.1	To Access the Audit Restriction-Diagnosis-Error Disposition Panel.....	302
6.76.6.2	To Add on the Audit Restriction-Diagnosis-Error Disposition Panel	303
6.76.6.3	To Update on the Audit Restriction-Diagnosis-Error Disposition Panel.....	303
6.76.6.4	To Delete on the Audit Restriction-Diagnosis-Error Disposition Panel.....	303
6.77	Audit Restriction-Financial Payer-Error Disposition Panel	304
6.77.1	Audit Restriction-Financial Payer-Error Disposition Panel Narrative	304
6.77.2	Audit Restriction-Financial Payer-Error Disposition Panel Layout	304
6.77.3	Audit Restriction-Financial Payer-Error Disposition Panel Field Descriptions	304
6.77.4	Audit Restriction-Financial Payer-Error Disposition Panel Field Edits	304
6.77.5	Audit Restriction-Financial Payer-Error Disposition Panel Extra Features	305
6.77.6	Audit Restriction-Financial Payer-Error Disposition Panel Accessibility.....	305
6.77.6.1	To Access the Audit Restriction-Financial Payer-Error Disposition Panel.....	305
6.77.6.2	To Add on the Audit Restriction-Financial Payer-Error Disposition Panel	305
6.77.6.3	To Update on the Audit Restriction-Financial Payer-Error Disposition Panel..	305
6.77.6.4	To Delete on the Audit Restriction- Financial Payer-Disposition Panel	306
6.78	Audit Restriction-GCN Sequence-Error Disposition Panel.....	307
6.78.1	Audit Restriction-GCN Sequence-Error Disposition Panel Narrative.....	307
6.78.2	Audit Restriction-GCN Sequence-Error Disposition Panel Layout	307
6.78.3	Audit Restriction-GCN Sequence-Error Disposition Panel Field Descriptions	307
6.78.4	Audit Restriction-GCN Sequence-Error Disposition Panel Field Edits	308
6.78.5	Audit Restriction-GCN Sequence-Error Disposition Panel Extra Features	308
6.78.6	Audit Restriction-GCN Sequence-Error Disposition Panel Accessibility.....	308
6.78.6.1	To Access the Audit Restriction- GCN Sequence-Error Disposition Panel	308
6.78.6.2	To Add on the Audit Restriction-GCN Sequence-Disposition Panel	308
6.78.6.3	To Update on the Audit Restriction-GCN Sequence-Disposition Panel	309
6.78.6.4	To Delete on the Audit Restriction- GCN Sequence-Disposition Panel	310
6.79	Audit Restriction-GPI-Error Disposition Panel	311
6.79.1	Audit Restriction-GPI-Error Disposition Panel Narrative	311
6.79.2	Audit Restriction-GPI-Error Disposition Panel Layout.....	311
6.79.3	Audit Restriction-GPI-Error Disposition Panel Field Descriptions.....	311
6.79.4	Audit Restriction-GPI-Error Disposition Panel Field Edits.....	311
6.79.5	Audit Restriction-GPI-Error Disposition Panel Extra Features.....	311
6.79.6	Audit Restriction-GPI-Error Disposition Panel Accessibility	312
6.79.6.1	To Access the Audit Restriction- GPI-Error Disposition Panel	312
6.79.6.2	To Add on the Audit Restriction- GPI-Error Disposition Panel.....	312
6.79.6.3	To Update on the Audit Restriction- GPI- Error Disposition Panel	312

6.79.6.4	To Delete on the Audit Restriction- GPI- Error Disposition Panel	312
6.80	Audit Restriction-HICL-Error Disposition Panel	313
6.80.1	Audit Restriction-HICL-Error Disposition Panel Narrative	313
6.80.2	Audit Restriction-HICL-Error Disposition Panel Layout.....	313
6.80.3	Audit Restriction-HICL-Error Disposition Panel Field Descriptions.....	313
6.80.4	Audit Restriction-HICL-Error Disposition Panel Field Edits.....	313
6.80.5	Audit Restriction-HICL-Error Disposition Panel Extra Features	314
6.80.6	Audit Restriction-HICL-Error Disposition Panel Accessibility	314
6.80.6.1	To Access the Audit Restriction-HICL-Error Disposition Panel	314
6.80.6.2	To Add on the Audit Restriction-HICL-Error Disposition Panel	314
6.80.6.3	To Update on the Audit Restriction-HICL-Error Disposition Panel	314
6.80.6.4	To Delete on the Audit Restriction-HICL-Error Disposition Panel	315
6.81	Audit Restriction-NDC-Error Disposition Panel	316
6.81.1	Audit Restriction-NDC-Error Disposition Panel Narrative	316
6.81.2	Audit Restriction-NDC-Error Disposition Panel Layout.....	316
6.81.3	Audit Restriction-NDC-Error Disposition Panel Field Descriptions.....	316
6.81.4	Audit Restriction-NDC-Error Disposition Panel Field Edits.....	316
6.81.5	Audit Restriction-NDC-Error Disposition Panel Extra Features	317
6.81.6	Audit Restriction-NDC-Error Disposition Panel Accessibility	317
6.81.6.1	To Access the Audit Restriction-NDC-Error Disposition Panel	317
6.81.6.2	To Add on the Audit Restriction-NDC-Error Disposition Panel.....	317
6.81.6.3	To Update on the Audit Restriction-NDC-Error Disposition Panel	317
6.81.6.4	To Delete on the Audit Restriction-NDC-Error Disposition Panel	318
6.82	Audit Restriction-Procedure (POS)-Error Disposition Panel	319
6.82.1	Audit Restriction-Procedure (POS)-Error Disposition Panel Narrative	319
6.82.2	Audit Restriction-Procedure (POS)-Error Disposition Panel Layout	319
6.82.3	Audit Restriction-Procedure (POS)-Error Disposition Panel Field Descriptions..	319
6.82.4	Audit Restriction-Procedure (POS)-Error Disposition Panel Field Edit Error Codes 319	
6.82.5	Audit Restriction-Procedure (POS)-Error Disposition Panel Extra Features	320
6.82.6	Audit Restriction-Procedure (POS)-Error Disposition Panel Accessibility	320
6.82.6.1	To Access the Audit Restriction-(POS)-Error Disposition Panel.....	320
6.82.6.2	To Add on the Audit Restriction-POS-Error Disposition Panel	320
6.82.6.3	To Update on the Audit Restriction-(POS)-Error Disposition Panel.....	321
6.82.6.4	To Delete on the Audit Restriction-(POS)-Error Disposition Panel.....	321
	Audit Restriction-Procedure (Contra)-Error Disposition Panel.....	322
5.75.1	Audit Restriction-Procedure (Contra)-Error Disposition Panel Narrative.....	322
5.75.2	Audit Restriction-Procedure (Contra)-Error Disposition Panel Layout	322
5.75.3	Audit Restriction-Procedure (Contra)-Error Disposition Panel Field Descriptions 322	
5.75.4	Audit Restriction-Procedure (Contra)-Error Disposition Panel Field Edits	323
5.75.5	Audit Restriction-Procedure (Contra)-Error Disposition Panel Extra Features	324
5.75.6	Audit Restriction-Procedure (Contra) Error Disposition Panel Accessibility	324
5.75.6.1	To Access the Audit Restriction (Contra) Error Disposition Panel	324
5.75.6.2	To Add on the Audit Restriction (Contra) Error Disposition Panel	325
5.75.6.3	To Update on the Audit Restriction (Contra) Error Disposition Panel.....	326

5.75.6.4	To Delete on the Audit Restriction (Contra) Error Disposition Panel.....	326
5.76	Audit Restriction-Procedure-Error Disposition Panel	327
5.76.1	Audit Restriction-Procedure-Error Disposition Panel Narrative	327
5.76.2	Audit Restriction-Procedure-Error Disposition Panel Layout.....	327
5.76.3	Audit Restriction-Procedure-Error Disposition Panel Field Descriptions.....	327
5.76.4	Audit Restriction-Procedure-Error Disposition Panel Field Edits.....	328
5.76.5	Audit Restriction-Procedure-Error Disposition Panel Extra Features	329
5.76.6	Audit Restriction-Procedure-Error Disposition Panel Accessibility	329
5.76.6.1	To Access the Audit Restriction Procedure-Error Disposition Panel	329
5.76.6.2	To Add on the Audit Restriction Procedure-Error Disposition Panel	329
5.76.6.3	To Update on the Audit Restriction Procedure-Error Disposition Panel.....	330
5.76.6.4	To Delete on the Audit Restriction Procedure-Error Disposition Panel.....	330
6.83	Audit Restriction-Provider Specialty-Error Disposition Panel.....	331
6.83.1	Audit Restriction-Provider Specialty-Error Disposition Panel Narrative.....	331
6.83.2	Audit Restriction-Provider Specialty-Error Disposition Panel Layout	331
6.83.3	Audit Restriction-Provider Specialty-Error Disposition Panel Field Descriptions	331
6.83.4	Audit Restriction-Provider Specialty-Error Disposition Panel Field Edits	332
6.83.5	Audit Restriction-Provider Specialty-Error Disposition Panel Extra Features.....	332
6.83.6	Audit Restriction-Provider Specialty-Error Disposition Panel Accessibility	332
6.83.6.1	To Access the Audit Restriction Provider Specialty-Error Disposition Panel ..	332
6.83.6.2	To Add on the Audit Restriction Provider Specialty-Error Disposition Panel ..	332
6.83.6.3	To Update on the Audit Restriction Provider Specialty-Error Disposition Panel	333
6.83.6.4	To Delete on the Audit Restriction Provider Specialty-Error Disposition Panel	333
6.84	Audit Restriction-Provider Type-Error Disposition Panel	334
6.84.1	Audit Restriction-Provider Type-Error Disposition Panel Narrative	334
6.84.2	Audit Restriction-Provider Type-Error Disposition Panel Layout	334
6.84.3	Audit Restriction-Provider Type-Error Disposition Panel Field Descriptions	334
6.84.4	Audit Restriction-Provider Type-Error Disposition Panel Field Edits	334
6.84.5	Audit Restriction-Provider Type-Error Disposition Panel Extra Features	335
6.84.6	Audit Restriction-Provider Type-Error Disposition Panel Accessibility.....	335
6.84.6.1	To Access the Audit Restriction Provider Type-Error Disposition Panel	335
	Accessibility.....	335
6.84.6.2	To Add on the Audit Restriction Provider Type-Error Disposition Panel	335
	Accessibility.....	335
6.84.6.3	To Update on the Audit Restriction Provider Type-Error Disposition Panel	335
	Accessibility.....	335
6.84.6.4	To Delete on the Audit Restriction Provider Type-Error Disposition Panel	336
	Accessibility.....	336
6.85	Audit Restriction-Recipient Plan-Error Disposition Panel	337
6.85.1	Audit Restriction-Recipient Plan-Error Disposition Panel Narrative	337
6.85.2	Audit Restriction-Recipient Plan-Error Disposition Panel Layout.....	337
6.85.3	Audit Restriction-Recipient Plan-Error Disposition Panel Field Descriptions.....	337
6.85.4	Audit Restriction-Recipient Plan-Error Disposition Panel Field Edits.....	337
6.85.5	Audit Restriction-Recipient Plan-Error Disposition Panel Extra Features	338

6.85.6	Audit Restriction-Recipient Plan-Error Disposition Panel Accessibility	338
6.85.6.1	To Access the Audit Restriction Recipient Plan-Error Disposition Panel.....	338
6.85.6.2	To Add on the Audit Restriction Recipient Plan-Error Disposition Panel	338
6.85.6.3	To Update on the Audit Restriction-Recipient Plan-Error Disposition Panel ...	338
6.85.6.4	To Delete on the Audit Restriction Recipient Plan-Error Disposition Panel.....	339
6.86	Audit Restriction-Revenue Code-Error Disposition Panel	340
6.86.1	Audit Restriction-Revenue Code-Error Disposition Panel Narrative	340
6.86.2	Audit Restriction-Revenue Code-Error Disposition Panel Layout.....	340
6.86.3	Audit Restriction-Revenue Code-Error Disposition Panel Field Descriptions.....	340
6.86.4	Audit Restriction-Revenue Code-Error Disposition Panel Field Edits.....	340
6.86.5	Audit Restriction-Revenue Code-Error Disposition Panel Extra Features	341
6.86.6	Audit Restriction-Revenue Code-Error Disposition Panel Accessibility	341
6.86.6.1	To Access the Audit Restriction Revenue Code-Error Disposition Panel.....	341
6.86.6.2	To Add on the Audit Restriction Revenue Code-Error Disposition Panel	341
6.86.6.3	To Update on the Audit Restriction-Revenue Code-Error Disposition Panel ...	342
6.86.6.4	To Delete on the Audit Restriction Revenue Code-Error Disposition Panel.....	342
6.87	Audit Restriction-Therapeutic Class-Error Disposition Panel.....	343
6.87.1	Audit Restriction-Therapeutic Class-Error Disposition Panel Narrative.....	343
6.87.2	Audit Restriction-Therapeutic Class-Error Disposition Panel Layout	343
6.87.3	Audit Restriction-Therapeutic Class-Error Disposition Panel Field Descriptions	343
6.87.4	Audit Restriction-Therapeutic Class-Error Disposition Panel Field Edits	343
6.87.5	Audit Restriction-Therapeutic Class-Error Disposition Panel Extra Features	344
6.87.6	Audit Restriction-Therapeutic Class-Error Disposition Panel Accessibility	344
6.87.6.1	To Access the Audit Restriction Therapeutic Class-Error Disposition Panel ...	344
6.87.6.2	To Add on the Audit Restriction Therapeutic Class-Error Disposition Panel...	345
6.87.6.3	To Update on the Audit Restriction- Therapeutic Class-Error Disposition Panel	345
6.87.6.4	To Delete on the Audit Restriction Therapeutic Class-Error Disposition Panel	345
6.88	Audit Restriction-Tooth Number-Error Disposition Panel.....	346
6.88.1	Audit Restriction-Tooth Number-Error Disposition Panel Narrative.....	346
6.88.2	Audit Restriction-Tooth Number-Error Disposition Panel Layout	346
6.88.3	Audit Restriction-Tooth Number-Error Disposition Panel Field Descriptions	346
6.88.4	Audit Restriction-Tooth Number-Error Disposition Panel Field Edits	346
6.88.5	Audit Restriction-Tooth Number-Error Disposition Panel Extra Features.....	346
6.88.6	Audit Restriction-Tooth Number-Error Disposition Panel Accessibility	347
6.88.6.1	To Access the Audit Restriction Tooth Number-Error Disposition Panel	347
6.88.6.2	To Add on the Audit Restriction Tooth Number-Error Disposition Panel	347
6.88.6.3	To Update on the Audit Restriction- Tooth Number-Error Disposition Panel ..	347
6.88.6.4	To Delete on the Audit Restriction Tooth Number-Error Disposition Panel	348
6.89	Audit Restriction-Type of Bill-Error Disposition Panel	349
6.89.1	Audit Restriction-Type of Bill-Error Disposition Panel Narrative.....	349
6.89.2	Audit Restriction-Type of Bill-Error Disposition Panel Layout.....	349
6.89.3	Audit Restriction-Type of Bill-Error Disposition Panel Field Descriptions	349
6.89.4	Audit Restriction-Type of Bill-Error Disposition Panel Field Edits	349
6.89.5	Audit Restriction-Type of Bill-Error Disposition Panel Extra Features.....	350
6.89.6	Audit Restriction-Type of Bill-Error Disposition Panel Accessibility	350

6.89.6.1	To Access the Audit Restriction Type of Bill-Error Disposition Panel.....	350
6.89.6.2	To Add on the Audit Restriction Type of Bill-Error Disposition Panel	350
6.89.6.3	To Update on the Audit Restriction-Type of Bill-Error Disposition Panel	350
6.89.6.4	To Delete on the Audit Restriction Type of Bill-Error Disposition Panel	351
6.90	Reference Modifier Search-Modifier Panel.....	352
6.90.1	Reference Modifier Search-Modifier Panel Narrative.....	352
6.90.2	Reference Modifier Search-Modifier Panel Layout	352
6.90.3	Reference Modifier Search-Modifier Panel Field Descriptions	352
6.90.4	Reference Modifier Search-Modifier Panel Field Edits	352
6.90.5	Reference Modifier Search-Modifier Panel Extra Features.....	353
6.90.6	Reference Modifier Search-Modifier Panel Accessibility	353
6.90.6.1	To Access the Modifier Search-Modifier Panel	353
6.91	Reference Modifier Search Results-Modifier Panel	354
6.91.1	Reference Modifier Search Results-Modifier Panel Narrative	354
6.91.2	Reference Modifier Search Results-Modifier Panel Layout.....	354
6.91.3	Reference Modifier Search Results-Modifier Panel Field Descriptions.....	354
6.91.4	Reference Modifier Search Results-Modifier Panel Field Edits.....	355
6.91.5	Reference Modifier Search Results-Modifier Panel Extra Features	355
6.91.6	Reference Modifier Search Results-Modifier Panel Accessibility	355
6.91.6.1	To Access the Reference Modifier Search Results-Modifier Panel	355
6.92	Modifier Mini Search-Modifier Panel	356
6.92.1	Modifier Mini Search-Modifier Panel Narrative	356
6.92.2	Modifier Mini Search-Modifier Panel Layout.....	356
6.92.3	Modifier Mini Search-Modifier Panel Field Descriptions.....	356
6.92.4	Modifier Mini Search-Modifier Panel Field Edits.....	356
6.92.5	Modifier Mini Search-Modifier Panel Extra Features	356
6.92.6	Modifier Mini Search-Modifier Panel Accessibility	357
6.92.6.1	To Access the Modifier Mini Search-Modifier Panel.....	357
6.92.6.2	To Navigate the Modifier Mini-Search-Modifier Panel	357
6.93	Modifier Information-Modifier Panel.....	358
6.93.1	Modifier Information-Modifier Panel Narrative.....	358
6.93.2	Modifier Information-Modifier Panel Layout	358
6.93.3	Modifier Information-Modifier Panel Field Descriptions	358
6.93.4	Modifier Information-Modifier Panel Field Edits	359
6.93.5	Modifier Information-Modifier Panel Extra Features.....	359
6.93.6	Modifier Information-Modifier Panel Accessibility	359
6.93.6.1	To Access the Modifier Information-Modifier Panel	359
6.94	Modifier Maintenance-Modifier Panel	360
6.94.1	Modifier Maintenance-Modifier Panel Narrative	360
6.94.2	Modifier Maintenance-Modifier Panel Layout	360
6.94.3	Modifier Maintenance-Modifier Panel Field Descriptions.....	360
6.94.4	Modifier Maintenance-Modifier Panel Field Edits.....	360
6.94.5	Modifier Maintenance-Modifier Panel Extra Features	361
6.94.6	Modifier Maintenance-Modifier Panel Accessibility	361
6.94.6.1	To Access the Modifier Maintenance-Modifier Panel.....	361
6.95	Base Information-Modifier Panel	362

6.95.1	Base Information-Modifier Panel Narrative	362
6.95.2	Base Information-Modifier Panel Layout	362
6.95.3	Base Information-Modifier Panel Field Descriptions	362
6.95.4	Base Information-Modifier Panel Field Edits	363
6.95.5	Base Information-Modifier Panel Extra Features	365
6.95.6	Base Information-Modifier Panel Accessibility	365
6.95.6.1	To Access the Base Information-Modifier Panel.....	365
6.95.6.2	To Add on the Base Information-Modifier Panel Accessibility	366
6.95.6.3	To Update on the Base Information-Modifier Panel	366
6.95.6.4	To Delete on the Base Information-Modifier Panel	366
6.96	Modifier Rate Data-Modifier Panel	367
6.96.1	Modifier Rate Data-Modifier Panel Narrative	367
6.96.2	Modifier Rate Data-Modifier Panel Layout.....	367
6.96.3	Modifier Rate Data-Modifier Panel Field Descriptions.....	367
6.96.4	Modifier Rate Data-Modifier Panel Field Edits.....	368
6.96.5	Modifier Rate Data-Modifier Panel Extra Features	369
6.96.6	Modifier Rate Data-Modifier Panel Accessibility	369
6.96.6.1	To Access the Modifier Rate Data-Modifier Panel	369
6.96.6.2	To Add on the Modifier Rate Data-Modifier Panel.....	370
6.96.6.3	To Update on the Modifier Rate Data-Modifier Panel	370
6.96.6.4	To Delete on the Modifier Rate Data-Modifier Panel	370
6.97	Group-Modifier Panel	371
6.97.1	Group-Modifier Panel Narrative	371
6.97.2	Group-Modifier Panel Layout.....	371
6.97.3	Group-Modifier Panel Field Descriptions	371
6.97.4	Group-Modifier Panel Field Edits	371
6.97.5	Group-Modifier Panel Extra Features.....	371
6.97.6	Group-Modifier Panel Accessibility	371
6.97.6.1	To Access the Group-Modifier Panel	371
6.98	Modifier to Modifier Restriction-Modifier Panel	373
6.98.1	Modifier to Modifier Restriction-Modifier Panel Narrative	373
6.98.2	Modifier to Modifier Restriction-Modifier Panel Layout.....	373
6.98.3	Modifier to Modifier Restriction-Modifier Panel Field Descriptions.....	373
6.98.4	Modifier to Modifier Restriction-Modifier Panel Field Edits.....	374
6.98.5	Modifier to Modifier Restriction-Modifier Panel Extra Features.....	375
6.98.6	Modifier to Modifier Restriction-Modifier Panel Accessibility	375
6.98.6.1	To Access the Modifier to Modifier Restriction-Modifier Panel	375
6.98.6.2	To Add on the Modifier to Modifier Restriction-Modifier Panel.....	375
6.98.6.3	To Update on the Modifier to Modifier Restriction-Modifier Panel	375
6.98.6.4	To Delete on the Modifier to Modifier Restriction-Modifier Panel	376
6.99	Note-Modifier Panel	377
6.99.1	Note-Modifier Panel Narrative	377
6.99.2	Note-Modifier Panel Layout	377
6.99.3	Note-Modifier Panel Field Descriptions	377
6.99.4	Note-Modifier Panel Field Edits	378
6.99.5	Note-Modifier Panel Extra Features	378

6.99.6	Note-Modifier Panel Accessibility	378
6.99.6.1	To Access the Note-Modifier Panel.....	378
6.99.6.2	To Add on the Note-Modifier Panel	378
6.99.6.3	To Update on the Note-Modifier Panel	378
6.99.6.4	To Delete on the Note-Modifier Panel.....	379
6.100	Reference Procedure Search-Procedure Panel.....	380
6.100.1	Reference Procedure Search-Procedure Panel Narrative.....	380
6.100.2	Reference Procedure Search-Procedure Panel Layout	380
6.100.3	Reference Procedure Search-Procedure Panel Field Descriptions	380
6.100.4	Reference Procedure Search-Procedure Panel Field Edits	381
6.100.5	Reference Procedure Search-Procedure Panel Extra Features.....	381
6.100.6	Reference Procedure Search-Procedure Panel Accessibility	381
6.100.6.1	To Access the Reference Procedure Search-Procedure Panel	381
6.101	Reference Procedure Search Results-Procedure Panel	382
6.101.1	Reference Procedure Search Results-Procedure Panel Narrative.....	382
6.101.2	Reference Procedure Search Results-Procedure Panel Layout.....	382
6.101.3	Reference Procedure Search Results-Procedure Panel Field Descriptions.....	382
6.101.4	Reference Procedure Search Results-Procedure Panel Field Edits.....	383
6.101.5	Reference Procedure Search Results-Procedure Panel Extra Features	383
6.101.6	Reference Procedure Search Results-Procedure Panel Accessibility	383
6.101.6.1	To Access the Reference Procedure Search Results-Procedure Panel	383
6.101.6.2	To Navigate the Reference Procedure Search Results-Procedure Panel	383
6.102	Procedure Mini Search-HCPCS Procedure Panel.....	384
6.102.1	Procedure Mini Search-HCPCS Procedure Panel Narrative	384
6.102.2	Procedure Mini Search-HCPCS Procedure Panel Layout	384
6.102.3	Procedure Mini Search-HCPCS Procedure Panel Field Descriptions	384
6.102.4	Procedure Mini Search-HCPCS Procedure Panel Field Edits	384
6.102.5	Procedure Mini Search-HCPCS Procedure Panel Extra Features	384
6.102.6	Procedure Mini Search-HCPCS Procedure Panel Accessibility	384
6.102.6.1	To Access the Procedure Mini Search-HCPCS Procedure Panel	384
6.102.6.2	To Navigate on the Procedure Mini Search-HCPCS Procedure Panel	385
6.103	Procedure Information-HCPCS Procedure Panel	386
6.103.1	Procedure Information-HCPCS Procedure Panel Narrative	386
6.103.2	Procedure Information-HCPCS Procedure Panel Layout.....	386
6.103.3	Procedure Information-HCPCS Procedure Panel Field Descriptions.....	387
6.103.4	Procedure Information-HCPCS Procedure Panel Field Edits.....	387
6.103.5	Procedure Information-HCPCS Procedure Panel Extra Features	387
6.103.6	Procedure Information-HCPCS Procedure Panel Accessibility	387
6.104	Procedure Maintenance-HCPCS Procedure Panel.....	387
6.104.1	Procedure Maintenance-HCPCS Procedure Panel Narrative	387
6.104.2	Procedure Maintenance-HCPCS Procedure Panel Layout	388
6.104.3	Procedure Maintenance-HCPCS Procedure Panel Field Descriptions	388
6.104.4	Procedure Maintenance-HCPCS Procedure Panel Field Edits	389
6.104.5	Procedure Maintenance-HCPCS Procedure Panel Extra Features	389
6.104.6	Procedure Maintenance-HCPCS Procedure Panel Accessibility.....	389
6.104.6.1	To Access the Procedure Maintenance-HCPCS Procedure Panel.....	389

6.104.6.2	To Navigate the Procedure Maintenance-HCPCS Procedure Panel	389
6.104.6.3	To Access the Procedure Information-HCPCS Procedure Panel	390
6.105	Base Information-HCPCS Procedure Panel.....	391
6.105.1	Base Information-HCPCS Procedure Panel Narrative	391
6.105.2	Base Information-HCPCS Procedure Panel Layout	392
6.105.3	Base Information-HCPCS Procedure Panel Field Descriptions	392
6.105.4	Base Information-HCPCS Procedure Panel Field Edits	393
6.105.5	Base Information-HCPCS Procedure Panel Extra Features	393
6.105.6	Base Information-HCPCS Procedure Panel Accessibility.....	393
6.105.6.1	To Access the Base Information-HCPCS Procedure Panel.....	393
6.105.6.2	To Add on the Base Information-HCPCS Procedure Panel Accessibility	394
6.105.6.3	To Update on the Base Information-HCPCS Procedure Panel.....	394
6.105.6.4	To Delete on the Base Information-HCPCS Procedure Panel.....	395
6.106	ASC Payment Group-HCPCS Procedure Panel	396
6.106.1	ASC Payment Group-HCPCS Procedure Panel Narrative	396
6.106.2	ASC Payment Group-HCPCS Procedure Panel Layout	396
6.106.3	ASC Payment Group-HCPCS Procedure Panel Field Descriptions	396
6.106.4	ASC Payment Group-HCPCS Procedure Panel Field Edits	397
6.106.5	ASC Payment Group-HCPCS Procedure Panel Extra Features	397
6.106.6	ASC Payment Group-HCPCS Procedure Panel Accessibility.....	397
6.106.6.1	To Access the ASC Payment Group-HCPCS Procedure Panel.....	397
6.106.6.2	To Add on the ASC Payment Group-HCPCS Procedure Panel	398
6.106.6.3	To Update on the ASC Payment Group-HCPCS Procedure Panel.....	398
6.106.6.4	To Delete on the ASC Payment Group-HCPCS Procedure Panel.....	399
6.107	Benefit Plan Coverage Rules- HCPCS Procedure Panel	400
6.107.1	Benefit Plan Coverage Rules- HCPCS Procedure Panel Narrative	400
6.107.2	Benefit Plan Coverage Rules- HCPCS Procedure Panel Layout.....	400
6.107.3	Benefit Plan Coverage Rules- HCPCS Procedure Panel Field Descriptions.....	400
6.107.4	Benefit Plan Coverage Rules- HCPCS Procedure Panel Field Edits.....	401
6.107.5	Benefit Plan Coverage Rules- HCPCS Procedure Panel Extra Features	401
6.107.6	Benefit Plan Coverage Rules- HCPCS Procedure Panel Accessibility	401
6.107.6.1	To Access the Benefit Plan Coverage Rules- HCPCS Procedure Panel	401
6.108	Contract Billing Rules- HCPCS Procedure Panel	402
6.108.1	Contract Billing Rules- HCPCS Procedure Panel Narrative	402
6.108.2	Contract Billing Rules- HCPCS Procedure Panel Layout	402
6.108.3	Contract Billing Rules- HCPCS Procedure Panel Field Descriptions	402
6.108.4	Contract Billing Rules- HCPCS Procedure Panel Field Edits	403
6.108.5	Contract Billing Rules- HCPCS Procedure Panel Extra Features	403
6.108.6	Contract Billing Rules- HCPCS Procedure Panel Accessibility.....	403
6.108.6.1	To Access the Contract Billing Rules- HCPCS Procedure Panel.....	403
6.109	GCN Seq Xref List.....	404
6.109.1	GCN Seq Xref List Panel Narrative.....	404
6.109.2	GCN Seq Xref List Panel Layout	404
6.109.3	GCN Seq Xref List Panel Field Descriptions	404
6.109.4	GCN Seq Xref List Panel Field Edits	405
6.109.5	GCN Seq Xref List Panel Extra Features	405

6.109.6	GCN Seq Xref List Panel Accessibility	406
6.109.6.1	To Access the GCN Seq Xref List Panel	406
6.110	Group-HCPCS Procedure Panel	407
6.110.1	Group-HCPCS Procedure Panel Narrative	407
6.110.2	Group-HCPCS Procedure Panel Layout	407
6.110.3	Group-HCPCS Procedure Panel Field Descriptions	407
6.110.4	Group-HCPCS Procedure Panel Field Edits	408
6.110.5	Group-HCPCS Procedure Panel Extra Features	408
6.110.6	Group-HCPCS Procedure Panel Accessibility	408
6.110.6.1	To Access the Group-HCPCS Procedure Panel	408
6.111	Max Fee-HCPCS Procedure Panel	409
6.111.1	Max Fee-HCPCS Procedure Panel Narrative	409
6.111.2	Max Fee-HCPCS Procedure Panel Layout	409
6.111.3	Max Fee-HCPCS Procedure Panel Field Descriptions	409
6.111.4	Max Fee-HCPCS Procedure Panel Field Edits	410
6.111.5	Max Fee-HCPCS Procedure Panel Extra Features	412
6.111.6	Max Fee-HCPCS Procedure Panel Accessibility	412
6.111.6.1	To Access the Max Fee-HCPCS Procedure Panel	412
6.111.6.2	To Add on the Max Fee-HCPCS Procedure Panel	413
6.111.6.3	To Update on the Max Fee-HCPCS Procedure Panel	413
6.111.6.4	To Delete on the Max Fee-HCPCS Procedure Panel	414
6.112	MedB Noncovered-HCPCS Procedure Panel	415
6.112.1	MedB Noncovered-HCPCS Procedure Panel Narrative	415
6.112.2	MedB Noncovered-HCPCS Procedure Layout	415
6.112.3	MedB Noncovered-HCPCS Procedure Panel Field Descriptions	415
6.112.4	MedB Noncovered-HCPCS Procedure Panel Extra Features	415
6.112.5	MedB Noncovered-HCPCS Procedure Panel Field Edits	415
6.112.6	MedB Noncovered-HCPCS Procedure Panel Accessibility	416
6.112.6.1	To Access the MedB Noncovered-HCPCS Procedure Panel	416
6.112.6.2	To Add on the MedB Noncovered-HCPCS Procedure Panel	416
6.112.6.3	To Update on the MedB Noncovered-HCPCS Procedure Panel	416
6.112.6.4	To Delete on the MedB Noncovered-HCPCS Procedure Panel	416
6.113	Modifier-HCPCS Procedure Panel	417
6.113.1	Modifier-HCPCS Procedure Panel Narrative	417
6.113.2	Modifier-HCPCS Procedure Panel Layout	417
6.113.3	Modifier-HCPCS Procedure Panel Field Descriptions	417
6.113.4	Modifier-HCPCS Procedure Panel Field Edit Error Codes	418
6.113.5	Modifier-HCPCS Procedure Panel Extra Features	418
6.113.6	Modifier-HCPCS Procedure Panel Accessibility	418
6.113.6.1	To Access the Modifier-HCPCS Procedure Panel	418
6.114	NDC - HCPCS Procedure Panel	420
6.114.1	NDC - HCPCS Procedure Panel Narrative	420
6.114.2	NDC - HCPCS Procedure Panel Layout	420
6.114.3	NDC- HCPCS Procedure Panel Field Descriptions	420
6.114.4	NDC - HCPCS Procedure Panel Field Edits	420
6.114.5	NDC- HCPCS Procedure Panel Extra Features	421

6.114.6	NDC- HCPCS Procedure Panel Accessibility	421
6.114.6.1	To Access the NDC - HCPCS Procedure Panel	421
6.115	Note-HCPCS Procedure Panel.....	422
6.115.1	Note-HCPCS Procedure Panel Narrative.....	422
6.115.2	Note-HCPCS Procedure Panel Layout	422
6.115.3	Note-HCPCS Procedure Panel Field Descriptions	422
6.115.4	Note-HCPCS Procedure Panel Field Edits	423
6.115.5	Note-HCPCS Procedure Panel Extra Features	423
6.115.6	Note-HCPCS Procedure Panel Accessibility.....	423
6.115.6.1	To Access the Note-HCPCS Procedure Panel	423
6.115.6.2	To Add on the Note-HCPCS Procedure Panel	424
6.115.6.3	To Update on the Note-HCPCS Procedure Panel.....	424
6.115.6.4	To Delete on the Note-HCPCS Procedure Panel.....	424
6.116	Procedure Audit-HCPCS Procedure Panel	425
6.116.1	Procedure Audit-HCPCS Procedure Panel Narrative	425
6.116.2	Procedure Audit-HCPCS Procedure Panel Layout.....	425
6.116.3	Procedure Audit-HCPCS Procedure Panel Field Descriptions.....	426
6.116.4	Procedure Audit-HCPCS Procedure Panel Field Edits.....	427
6.116.5	Procedure Audit-HCPCS Procedure Panel Extra Features	427
6.116.6	Procedure Audit-HCPCS Procedure Panel Accessibility	427
6.116.6.1	To Access the Audit-HCPCS Procedure Panel.....	427
6.117	Reimbursement Rules-HCPCS Procedure.....	429
6.117.1	Reimbursement Rules- HCPCS Procedure Narrative.....	429
6.117.2	Reimbursement Rules-HCPCS Procedure Panel Layout.....	429
6.117.3	Reimbursement Rules-HCPCS Procedure Panel Field Descriptions.....	429
6.117.4	Reimbursement Rules-HCPCS Procedure Panel Field Edits	430
6.117.5	Reimbursement Rules-HCPCS Procedure Panel Extra Features.....	430
6.117.6	Reimbursement Rules-HCPCS Procedure Panel Accessibility	431
6.117.6.1	To Access the Reimbursement Rules-HCPCS Procedure Panel	431
6.118	Restriction Base Information-HCPCS Procedure Panel	432
6.118.1	Restriction Base Information-HCPCS Procedure Panel Narrative.....	432
6.118.2	Restriction Base Information-HCPCS Procedure Panel Layout.....	432
6.118.3	Restriction Base Information-HCPCS Procedure Panel Field Descriptions.....	432
6.118.4	Restriction Base Information-HCPCS Procedure Panel Field Edits.....	433
6.118.5	Restriction Base Information-HCPCS Procedure Panel Extra Features.....	434
6.118.6	Restriction Base Information-HCPCS Procedure Panel Accessibility	434
6.118.6.1	To Access the Restriction Base Information-HCPCS Procedure Panel	434
6.118.6.2	To Add on the Restriction Base Information-HCPCS Procedure Panel.....	435
6.118.6.3	To Update on the Restriction Base Information-HCPCS Procedure Panel	435
6.118.6.4	To Delete on the Restriction Base Information-HCPCS Procedure Panel	435
6.119	Tooth-HCPCS Procedure Panel.....	436
6.119.1	Tooth-HCPCS Procedure Panel Narrative.....	436
6.119.2	Tooth-HCPCS Procedure Panel Layout.....	436
6.119.3	Tooth-HCPCS Procedure Panel Field Descriptions	436
6.119.4	Tooth-HCPCS Procedure Panel Field Edits	437
6.119.5	Tooth-HCPCS Procedure Panel Extra Features.....	438

6.119.6	Tooth-HCPCS Procedure Panel Accessibility	438
6.119.6.1	To Access the Tooth-HCPCS Procedure Panel	438
6.119.6.2	To Add on the Tooth-HCPCS Procedure Panel.....	438
6.119.6.3	To Update on the Tooth-HCPCS Procedure Panel	438
6.119.6.4	To Delete on the Tooth-HCPCS Procedure Panel	439
6.120	Tooth Quadrant-HCPCS Procedure Panel	440
6.120.1	Tooth Quadrant-HCPCS Procedure Panel Narrative	440
6.120.2	Tooth Quadrant-HCPCS Procedure Panel Layout.....	440
6.120.3	Tooth Quadrant-HCPCS Procedure Panel Field Descriptions.....	440
6.120.4	Tooth Quadrant-HCPCS Procedure Panel Field Edits.....	441
6.120.5	Tooth Quadrant-HCPCS Procedure Panel Extra Features	441
6.120.6	Tooth Quadrant-HCPCS Procedure Panel Accessibility	442
6.120.6.1	To Access the Tooth Quadrant-HCPCS Procedure Panel	442
6.120.6.2	To Add on the Tooth Quadrant-HCPCS Procedure Panel.....	442
6.120.6.3	To Update on the Tooth Quadrant-HCPCS Procedure Panel	442
6.120.6.4	To Delete on the Tooth Quadrant-HCPCS Procedure Panel	442
6.121	Procedure Mini Search-ICD Procedure Panel	444
6.121.1	Procedure Mini Search-ICD Procedure Panel Narrative	444
6.121.2	Procedure Mini Search-ICD Procedure Panel Layout.....	444
6.121.3	Procedure Mini Search-ICD Procedure Panel Field Descriptions.....	444
6.121.4	Procedure Mini Search-ICD Procedure Panel Field Edits	444
6.121.5	Procedure Mini Search-ICD Procedure Panel Extra Features	444
6.121.6	Procedure Mini Search-ICD Procedure Panel Accessibility	444
6.121.6.1	To Access the Procedure Mini-Search-ICD Procedure Panel	444
6.121.6.2	To Navigate the Procedure Mini-Search-ICD Procedure Panel	445
6.122	Procedure Information-ICD Procedure Panel	446
6.122.1	Procedure Information-ICD Procedure Panel Narrative.....	446
6.122.2	Procedure Information-ICD Procedure Panel Layout.....	446
6.122.3	Procedure Information-ICD Procedure Panel Field Descriptions	446
6.122.4	Procedure Information-ICD Procedure Panel Field Edits	447
6.122.5	Procedure Information-ICD Procedure Panel Extra Features.....	447
6.122.6	Procedure Information-ICD Procedure Panel Accessibility	447
6.122.6.1	To Access the Procedure Information- ICD Procedure Panel	447
6.123	Procedure Maintenance-ICD Procedure Panel	448
6.123.1	Procedure Maintenance-ICD Procedure Panel Narrative	448
6.123.2	Procedure Maintenance-ICD Procedure Panel Layout	448
6.123.3	Procedure Maintenance-ICD Procedure Panel Field Descriptions.....	448
6.123.4	Procedure Maintenance-ICD Procedure Panel Field Edits	449
6.123.5	Procedure Maintenance-ICD Procedure Panel Extra Features	449
6.123.6	Procedure Maintenance-ICD Procedure Panel Accessibility	449
6.123.6.1	To Access the Procedure Maintenance- ICD Procedure Panel.....	449
6.124	Base Information-ICD Procedure Panel	450
6.124.1	Base Information-ICD Procedure Panel Narrative	450
6.124.2	Base Information-ICD Procedure Panel Layout	450
6.124.3	Base Information-ICD Procedure Panel Field Descriptions.....	450
6.124.4	Base Information-ICD Procedure Panel Field Edits	451

6.124.5	Base Information-ICD Procedure Panel Extra Features	451
6.124.6	Base Information-ICD Procedure Panel Accessibility	452
6.124.6.1	To Access the Base Information-ICD Procedure Panel.....	452
6.124.6.2	To Add on the Base Information- ICD Procedure Panel	452
6.124.6.3	To Update on the Base Information-ICD Procedure Panel	452
6.124.6.4	To Delete on the Base Information-ICD Procedure Panel.....	453
6.125	Benefit Plan Coverage Rules-ICD Procedure Panel.....	454
6.125.1	Benefit Plan Coverage Rules-ICD-Procedure Panel Narrative	454
6.125.2	Benefit Plan Coverage Rules-ICD Procedure Panel Layout	454
6.125.3	Benefit Plan Coverage Rules-ICD Procedure Panel Field Descriptions	454
6.125.4	Benefit Plan Coverage Rules-ICD Procedure Panel Field Edit Error Codes	455
6.125.5	Benefit Plan Coverage Rules-ICD Procedure Panel Extra Features	455
6.125.6	Benefit Plan Coverage Rules-ICD Procedure Panel Accessibility	455
6.125.6.1	To Access the Benefit Plan Coverage Rules-ICD Panel	455
6.126	Contract Billing Rules-ICD Procedure Panel	456
6.126.1	Contract Billing Rules- ICD Procedure Panel Narrative	456
6.126.2	Contract Billing Rules-ICD Procedure Panel Layout.....	456
6.126.3	Contract Billing Rules- ICD Procedure Panel Field Descriptions.....	456
6.126.4	Contract Billing Rules- ICD Procedure Panel Field Edit Error Codes	457
6.126.5	Contract Billing Rules-ICD Procedure Panel Extra Features	457
6.126.6	Contract Billing Rules-ICD Procedure Panel Accessibility	457
6.126.6.1	To Access the Contract Billing Rules-ICD Panel.....	457
6.127	Diagnosis Restriction-ICD Procedure Panel.....	458
6.127.1	Diagnosis Restriction-ICD Procedure Panel Narrative.....	458
6.127.2	Diagnosis Restriction-ICD Procedure Panel Layout	458
6.127.3	Diagnosis Restriction-ICD Procedure Panel Field Descriptions	458
6.127.4	Diagnosis Restriction-ICD Procedure Panel Field Edits	459
6.127.5	Diagnosis Restriction-ICD Procedure Panel Extra Features	460
6.127.6	Diagnosis Restriction-ICD Procedure Panel Accessibility	460
6.127.6.1	To Access the Diagnosis Restriction-ICD Procedure Panel	460
6.127.6.2	To Add on the Diagnosis Restriction-ICD Procedure Panel	461
6.127.6.3	To Update on the Diagnosis Restriction-ICD Procedure Panel.....	461
6.127.6.4	To Delete on the Diagnosis Restriction-ICD Procedure Panel	461
6.128	Group-ICD Procedure Panel	462
6.128.1	Group ICD Procedure Panel Narrative	462
6.128.2	Group- ICD Procedure Panel Layout.....	462
6.128.3	Group- ICD Procedure Panel Field Descriptions.....	462
6.128.4	Group- ICD Procedure Panel Field Edits.....	463
6.128.5	Group- ICD Procedure Panel Extra Features	463
6.128.6	Group- ICD Procedure Panel Accessibility	463
6.128.6.1	To Access the Group-ICD Procedure Panel	463
6.129	Note-ICD Procedure Panel	464
6.129.1	Note-ICD Procedure Panel Narrative	464
6.129.2	Note-ICD Procedure Panel Layout	464
6.129.3	Note-ICD Procedure Panel Field Descriptions	464
6.129.4	Note-ICD Procedure Panel Field Edits	465

6.129.5	Note-ICD Procedure Panel Extra Features	465
6.129.6	Note-ICD Procedure Panel Accessibility.....	465
6.129.6.1	To Access the Note-ICD Procedure Panel.....	465
6.129.6.2	To Add on the Note-ICD Procedure Panel	465
6.129.6.3	To Update on the Note ICD Procedure Panel	465
6.129.6.4	To Delete on the Note –ICD Procedure Panel	466
6.130	Reimbursement Rules-ICD Procedure Panel.....	467
6.130.1	Reimbursement-ICD Procedure Panel Narrative.....	467
6.130.2	Reimbursement-ICD Procedure Panel Layout.....	467
6.130.3	Reimbursement-ICD Procedure Panel Field Descriptions	467
6.130.4	Reimbursement-ICD Procedure Panel Field Edit Error Codes.....	468
6.130.5	Reimbursement-ICD Procedure Panel Extra Features.....	468
6.130.6	Reimbursement-ICD Procedure Panel Accessibility	468
6.130.6.1	To Access the Reimbursement Rules-ICD Panel	468
6.131	Restriction-ICD Procedure Panel.....	469
6.131.1	Restriction-ICD Procedure Panel Narrative.....	469
6.131.2	Restriction-ICD Procedure Panel Layout	469
6.131.3	Restriction-ICD Procedure Panel Field Descriptions	469
6.131.4	Restriction-ICD Procedure Panel Field Edits	470
6.131.5	Restriction-ICD Procedure Panel Extra Features	472
6.131.6	Restriction-ICD Procedure Panel Accessibility	472
6.131.6.1	To Access the Restriction-ICD Procedure Panel	472
6.131.6.2	To Add on the Restriction-ICD Procedure Panel	472
6.131.6.3	To Update on the Restriction-ICD Procedure Panel.....	473
6.131.6.4	To Delete on the Restriction-ICD Procedure Panel.....	473
6.132	Reference Revenue Search-Revenue Panel	474
6.132.1	Reference Revenue Search-Revenue Panel Narrative	474
6.132.2	Reference Revenue Search-Revenue Panel Layout.....	474
6.132.3	Reference Revenue Search-Revenue Panel Field Descriptions.....	474
6.132.4	Reference Revenue Search-Revenue Panel Field Edits.....	475
6.132.5	Reference Revenue Search-Revenue Panel Extra Features	475
6.132.6	Reference Revenue Search-Revenue Panel Accessibility	475
6.132.6.1	To Access the Reference Search Revenue-Revenue Panel.....	475
6.133	Reference Revenue Search Results-Revenue Panel	476
6.133.1	Reference Revenue Search Results-Revenue Panel Narrative	476
6.133.2	Reference Revenue Search Results-Revenue Panel Layout	476
6.133.3	Reference Revenue Search Results-Revenue Panel Field Descriptions.....	476
6.133.4	Reference Revenue Search Results-Revenue Panel Field Edits	476
6.133.5	Reference Revenue Search Results-Revenue Panel Extra Features	476
6.133.6	Reference Revenue Search Results-Revenue Panel Accessibility.....	477
6.133.6.1	To Access the Reference Revenue Search Results-Revenue Panel.....	477
6.133.6.2	To Navigate the Revenue Reference Search Results-Revenue Panel.....	477
6.134	Revenue Information-Revenue Panel	478
6.134.1	Revenue Information-Revenue Panel Narrative	478
6.134.2	Revenue Information-Revenue Panel Layout.....	478
6.134.3	Revenue Information-Revenue Panel Field Descriptions.....	478

6.134.4	Revenue Information-Revenue Panel Field Edits	478
6.134.5	Revenue Information-Revenue Panel Extra Features	479
6.134.6	Revenue Information-Revenue Panel Accessibility	479
6.134.6.1	To Access the Revenue Information-Revenue Panel.....	479
6.135	Revenue Maintenance-Revenue Panel.....	480
6.135.1	Revenue Maintenance-Revenue Panel Narrative.....	480
6.135.2	Revenue Maintenance-Revenue Panel Layout	480
6.135.3	Revenue Maintenance-Revenue Panel Field Descriptions	480
6.135.4	Revenue Maintenance-Revenue Panel Field Edits	481
6.135.5	Revenue Maintenance-Revenue Panel Extra Features	481
6.135.6	Revenue Maintenance-Revenue Panel Accessibility	481
6.135.6.1	To Access the Revenue Maintenance-Revenue Panel	481
6.136	Revenue Mini Search-Revenue Panel.....	482
6.136.1	Revenue Mini Search-Revenue Panel Narrative.....	482
6.136.2	Revenue Mini Search-Revenue Panel Layout	482
6.136.3	Revenue Mini Search-Revenue Panel Field Descriptions	482
6.136.4	Revenue Mini Search-Revenue Panel Field Edits	482
6.136.5	Revenue Mini Search-Revenue Panel Extra Features	482
6.136.6	Revenue Mini Search-Revenue Panel Accessibility	483
6.136.6.1	To Access the Revenue Mini Search-Revenue Panel	483
6.136.6.2	To Navigate the Revenue Mini Search-Revenue Panel	483
6.137	Base Information-Revenue Panel	484
6.137.1	Base Information-Revenue Panel Narrative	484
6.137.2	Base Information-Revenue Panel Layout	484
6.137.3	Base Information-Revenue Panel Field Descriptions	484
6.137.4	Base Information-Revenue Panel Field Edits	485
6.137.5	Base Information-Revenue Panel Extra Features	485
6.137.6	Base Information-Revenue Panel Accessibility.....	485
6.137.6.1	To Access the Base Information-Revenue Panel.....	485
6.137.6.2	To Add on the Base Information-Revenue Panel	486
6.137.6.3	To Update on the Base Information-Revenue Panel.....	486
6.137.6.4	To Delete on the Base Information-Revenue Panel.....	487
6.138	Benefit Plan Coverage Rules-Revenue Panel	488
6.138.1	Benefit Plan Coverage Rules- Revenue Panel Narrative	488
6.138.2	Benefit Plan Coverage Rules-Revenue Panel Layout.....	488
6.138.3	Benefit Plan Coverage Rules-Revenue Panel Field Descriptions.....	488
6.138.4	Benefit Plan Coverage Rules-Revenue Panel Field Edits.....	489
6.138.5	Benefit Plan Coverage Rules-Revenue Panel Extra Features	489
6.138.6	Benefit Plan Coverage Rules-Revenue Panel Accessibility	489
6.138.6.1	To Access the Benefit Plan Coverage Rules- Revenue Panel	489
6.139	Contract Billing Rules-Revenue Panel	490
6.139.1	Contract Billing Rules- Revenue Panel Narrative	490
6.139.2	Contract Billing Rules-Revenue Panel Layout	490
6.139.3	Contract Billing Rules-Revenue Panel Field Descriptions	490
6.139.4	Contract Billing Rules-Revenue Panel Field Edits	491
6.139.5	Contract Billing Rules-Revenue Panel Extra Features	491

6.139.6	Contract Billing Rules-Revenue Panel Accessibility	491
6.139.6.1	To Access the Contract Billing Rules-Revenue Panel.....	491
6.140	Flat Fee-Revenue Panel	492
6.140.1	Flat Fee-Revenue Panel Narrative	492
6.140.2	Flat Fee-Revenue Panel Layout	492
6.140.3	Flat Fee-Revenue Panel Field Descriptions	492
6.140.4	Flat Fee-Revenue Panel Field Edits	493
6.140.5	Flat Fee-Revenue Panel Extra Features	494
6.140.6	Flat Fee-Revenue Panel Accessibility	494
6.140.6.1	To Access the Flat Fee-Revenue Panel.....	494
6.140.6.2	To Add on the Flat Fee-Revenue Panel	494
6.140.6.3	To Update on the Flat Fee-Revenue Panel	495
6.140.6.4	To Delete on the Flat Fee-Revenue Panel.....	495
6.141	Group-Revenue Panel	496
6.141.1	Group-Revenue Panel Narrative	496
6.141.2	Group-Revenue Panel Layout	496
6.141.3	Group-Revenue Panel Field Descriptions	496
6.141.4	Group-Revenue Panel Field Edits	496
6.141.5	Group-Revenue Panel Extra Features	496
6.141.6	Group-Revenue Panel Accessibility	497
6.141.6.1	To Access the Group -Revenue Panel	497
6.142	HCPCS Procedure Restriction-Revenue Panel	498
6.142.1	HCPCS Procedure Restriction-Revenue Panel Narrative	498
6.142.2	HCPCS Procedure Restriction-Revenue Panel Layout.....	498
6.142.3	HCPCS Procedure Restriction-Revenue Panel Field Descriptions	498
6.142.4	HCPCS Procedure Restriction-Revenue Panel Field Edits	499
6.142.5	HCPCS Procedure Restriction-Revenue Panel Extra Features	500
6.142.6	HCPCS Procedure Restriction-Revenue Panel Accessibility	500
6.142.6.1	To Access the HCPCS Procedure Restriction-Revenue Panel	500
6.142.6.2	To Add on the HCPCS Procedure Restriction-Revenue Panel.....	500
6.142.6.3	To Update on the HCPCS Procedure Restriction-Revenue Panel	500
6.142.6.4	To Delete on the HCPCS Procedure Restriction-Revenue Panel	501
6.143	Note-Revenue Panel.....	502
6.143.1	Note-Revenue Panel Narrative	502
6.143.2	Note-Revenue Panel Layout	502
6.143.3	Note-Revenue Panel Field Descriptions	502
6.143.4	Note-Revenue Panel Field Edits	503
6.143.5	Note-Revenue Panel Extra Features	503
6.143.6	Note-Revenue Panel Accessibility.....	503
6.143.6.1	To Access the Note-Revenue Panel	503
6.143.6.2	To Add on the Note-Revenue Panel	503
6.143.6.3	To Update on the Note Revenue Panel	503
6.143.6.4	To Delete on the Note-Revenue Panel.....	504
6.144	Reimbursement Rules-Revenue.....	505
6.144.1	Reimbursement Rules-Revenue Panel Narrative.....	505
6.144.2	Reimbursement Rules-Revenue Panel Layout.....	505

6.144.3	Reimbursement Rules-Revenue Panel Field Descriptions	505
6.144.4	Reimbursement Rules-Revenue Panel Field Edits	506
6.144.5	Reimbursement Rules-Revenue Panel Extra Features.....	506
6.144.6	Reimbursement Rules-Revenue Panel Accessibility	507
6.144.6.1	To Access the Reimbursement Rules-Revenue Panel	507

1. Document control

The latest version of this document is stored electronically. Any printed copy has to be considered an uncontrolled copy.

1.1 Document Information Page

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1.2 Amendment History

The following Amendment History log contains a record of changes made to this document:

Date	Document Version	Author	Reason for the Change	Changes (Section, Page(s) and Text Revised)
02/19/2013	1.0		Application of production change orders	CO 10005 – update panel layout and field edit error message for the Audit Criteria Base –Error Disposition panel.
08/13/2013	2.0		Application of production change orders	CO 9770- CO 10288 – Add Section 6.111 Modifier-HCPCS Procedure Panel CO 9770 – Update panel layout and field description for Section 6.109 Procedure Audit-HCPCS Panel
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Date	Document Version	Author	Reason for the Change	Changes (Section, Page(s) and Text Revised)
				<p>Reference Procedure Search Results - Procedure Panel</p> <p>CO 10273 - section 6.115 Procedure Mini Search-ICD Procedure Panel – update layout and field descriptions.</p> <p>CO 10273 – section 6.116 Procedure Maintenance ICD Procedure Panel – update layout. Replace references to ICD-9-CM to ICD.</p> <p>CO 10273 – section 6.116 Procedure Information-ICD Procedure Panel – update layout and field descriptions.</p> <p>CO 10273 – section 6.118 Base Information-ICD Procedure Panel – update layout, field descriptions and field edit error messages.</p> <p>CO 10276 – section 6.122 Group ICD Procedure Panel – Update layout and field descriptions</p> <p>CO 10285 – section 6.121 Diagnosis Restriction ICD Procedure Panel – update layout, field descriptions and field edit error messages.</p> <p>CO 10284 – section 6.71 Audit Restriction- Diagnosis –Error Disposition Panel – update layout, field descriptions and field edit error messages.</p> <p>CO 10278 – 6.1 Diagnosis Search Panel – update layout and field descriptions</p> <p>CO 10278 6.2 Diagnosis Search Results panel – update panel layout and field descriptions.</p> <p>Co 10279 – 6.7 update Base Information – Diagnosis Panel – update layout, field descriptions and field edit error messages.</p> <p>CO 10279 –6.6 Diagnosis Mini Search Panel – Update layout and field descriptions</p>

Date	Document Version	Author	Reason for the Change	Changes (Section, Page(s) and Text Revised)
				CO 10279 6.3 Diagnosis Information Panel CO 10282 – 6.9 Group Diagnosis Panel – update layout and field descriptions
07/21/2015	4.0		Application of ACA III Production Change Order	CO 12207 Disposition Criteria –Region Daa Error Disposition Panel – Update layout and field edit error messages.
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09/09/2018	8.0		Application of CO 15069 and 14900	Updates to Reimburesment Rule panels Added Drug MMC Maintenance panel Update Drug Maintenance Panel
11/1/2018	9.0		Remove PHI PII from	None found in Part 1.

Date	Document Version	Author	Reason for the Change	Changes (Section, Page(s) and Text Revised)
			User Manual	Note: Updated to DXC branding.
11/28/2018	10.0		Application of CO 15264	Other-Fund Code Criteria Panel- panel layout, field descriptions updates
01/09/2019	11.0		Application of CO 15303	Panel layout and field descriptions updated for the following panels: 6.4 Diagnosis Information Panel 6.47 Error Disposition Information – Error Disposition Panel 6.33 Generic Drug Panel 6.91 Modifier Information – Modifier Panel 6.1 Reference Drug Information Panel

1.3 Related Documentation

Document	Description	url

2. Reference Data Maintenance Introduction

2.1 Reference Data Maintenance User Manual Overview

The AMMIS has several functional areas that perform specific operations for the system users. This user manual is designed to cover the information necessary to perform the tasks associated with the Reference Data Maintenance functional area.

This manual covers the following:

- Reference Data Maintenance Overview
- Reference Data Maintenance System Navigation
- Reference Maintenance Pages/Panels
- Reference Maintenance Reports

2.2 Reference Data Maintenance User Manual Objective

This section explains the objective of the AMMIS Reference Data Maintenance User Manual is to provide system users with detailed descriptions of the online system, including pages/panels and report field descriptions, pages/panels functionality descriptions and graphical representations of pages/panels and report layouts.

3. Reference Data Maintenance Overview

3.1 Introduction to Reference Data Maintenance

The Reference Data Maintenance function maintains a consolidated source of reference information that is accessed by the Alabama interChange System during performance of claims and adjustment processing functions, prior authorization functions, Third Party Liability (TPL) processing. The Reference Data Maintenance function also supports Alabama interChange System reporting functions.

The Reference Data Maintenance function maintains the following logical data groupings:

- Benefit Plan data set identifying a group of covered services (benefits) that are granted to a member who is deemed eligible for the services the benefit plan represents. Benefit Plan configuration includes:
 - Coverage Rules detailing restrictions for services within a Benefit Plan.
 - Reimbursement Rules for selecting a payment method to reimburse a Provider for services provided to an eligible member.
 - Billing Rules classifying services a Provider can bill within a contract.
- Diagnosis data set utilizing the International Classification of Diseases, Ninth Revision coding system and diagnosis coding.
- Drug data set of eleven (11) digit National Drug Codes (NDC) including descriptive and pricing information for each code.
- Edit/Audit Criteria data used to enforce State policy in adjudicating claims. The edit function verifies the accuracy, validity, required presence, format, consistency, allowable values, and integrity of data submitted. The audit function compares the data of a claim in process with other claim data in paid claims history to determine the appropriateness of the service reflected on the claim in relation to other services received by the member.
- ICD Procedure data set that contains International Classification of Diseases, Ninth Revision, Clinical Modification procedure codes used for inpatient hospital billing.
- Modifier data set that contains codes used to further describe and qualify services provided.
- Procedure data set that contains Centers for Medicare and Medicaid Services (CMS) Health Common Procedure Coding System (HCPCS) procedure codes, Common Procedure Terminology (CPT) procedure codes including descriptive and pricing information for each code.
- Revenue codes data set for use in processing claims for hospital inpatient and outpatient services including descriptive and pricing information for each code.

4. Reference Data Maintenance System Navigation

4.1 Overview

The Alabama interChange System is designed according to a set of development standards. This section is designed to introduce users to standard system navigation features within interChange.

4.2 System Security

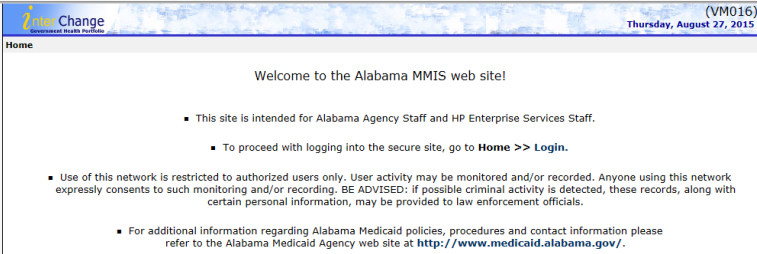
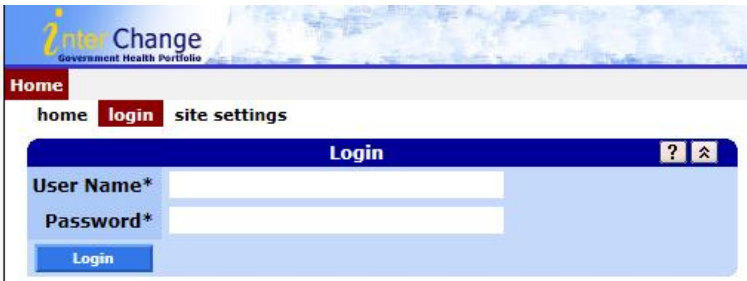
System security is handled by your system administrator. For all other security concerns with operating the system, refer to your department's business rules and practices.

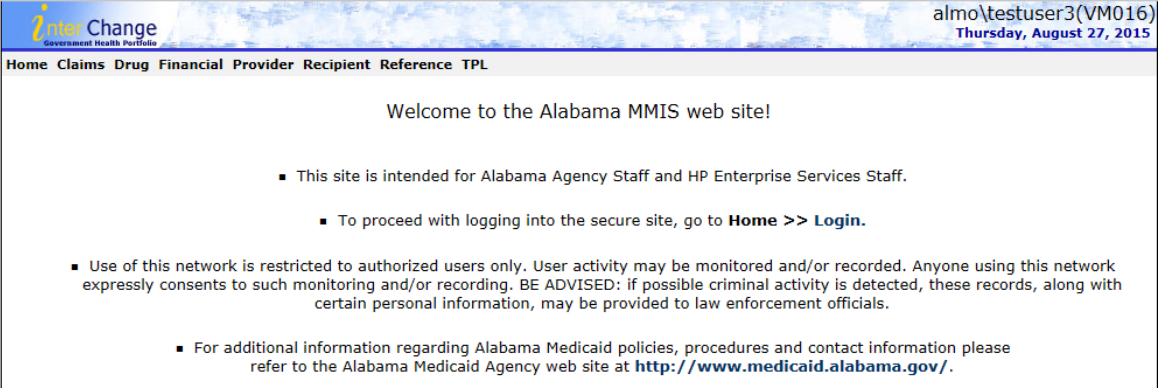
4.3 Logging In/Logging Out

Users must successfully log into the Alabama interChange website in order to utilize the services available within the secure portal.


4.3.1 Logging into the interChange System

Follow the steps below to log into the website:

Step	Action	Response
1	Click Internet Explorer or Netscape Communicator browser located on your workstation.	Internet Explorer or Netscape Communicator launches.
2	Enter https://pro.alxix.slg.eds.com/alabama/default.aspx and press Enter key on your keyboard.	Security Alert message displays.
3	AMMIS Home page displays. 	AMMIS Authentication Home page displays.
4	Click Home -> Login  Note: All field edits are available on iTRACE for login panel.	
5	Enter User Name and Password . Click OK .	

Step	Action	Response
		 <p>The screenshot shows the Alabama MMIS web site. At the top, there is a header with the 'interChange' logo and the text 'Government Health Portfolio'. To the right of the header, it says 'almo\testuser3(VM016)' and 'Thursday, August 27, 2015'. Below the header is a navigation bar with links: Home, Claims, Drug, Financial, Provider, Recipient, Reference, and TPL. The main content area displays a welcome message: 'Welcome to the Alabama MMIS web site!'. Below this, there are three bullet points: <ul style="list-style-type: none"> This site is intended for Alabama Agency Staff and HP Enterprise Services Staff. To proceed with logging into the secure site, go to Home >> Login. Use of this network is restricted to authorized users only. User activity may be monitored and/or recorded. Anyone using this network expressly consents to such monitoring and/or recording. BE ADVISED: if possible criminal activity is detected, these records, along with certain personal information, may be provided to law enforcement officials. At the bottom, there is another bullet point: <ul style="list-style-type: none"> For additional information regarding Alabama Medicaid policies, procedures and contact information please refer to the Alabama Medicaid Agency web site at http://www.medicaid.alabama.gov/. </p>

4.3.2 Logging out of the interChange System

Click the Exit  button on your internet browser or Click Home -> LogOff to log off the AMMIS.

4.3.3 To Set System Text Size

To set system text size, perform the following steps:

Step	Action	Response
1	Log into interChange.	Home page displays.
2	Select View.	View menu displays.
3	Point to Text Size and click Smaller.	Default text size is set to medium. After the user selects smaller, the system objects appear smaller.

4.4 Changing Passwords

The Change Password panel allows users to change their account password.

Navigation Path: [Home] – [Change Password]

NOTE:

Each field which contains an asterisk represents a required field. Therefore, the corresponding panel is not considered complete until those fields have been completed with the appropriate data.



Follow the steps below to change your password:

Step	Action	Response
1	Enter Current password.	
2	Press Tab .	User is taken to the New password field.
3	Enter New password.	
4	Press Tab .	User is taken to the Confirm password field.
5	Confirm password by entering it again.	
6	Press Change Password button.	Password successfully changed. Note: If a user enters an invalid password the system displays an error message. HPE employees with password problems will need to contact the LAN team. Agency employees with password problems will need to contact the Assistant MMIS Coordinator.

5. System Wide Common Terminology and Layouts

The following section identifies common system terminology and features, and where applicable, an associated screen capture or design layout. This is not an all-inclusive list of common system terms and layouts; however, it is a basic foundation for the beginning user to view and understand prior to navigating the system. These terms are used by technical team members, training specialists, and help desk staff when discussing or more importantly, documenting aspects of the system.

For information about system wide objects, instead of clicking a subsystem link within the technical design page, the user clicks the System Wide link to open documentation of system objects which are common system wide within the application.

Below is a partial list of common terms which are described within this document:

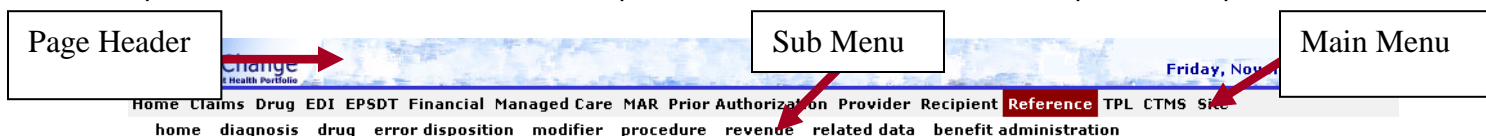
- Page
- Page Header
- Page Footer
- Sub Menu
- Shortcut Keys (ctrl + alt + letter)
- Main Menu bar
- Panel
- Advanced Search
- Mini Search panel
- Hot Link
- Information panel
- Navigation panel
- Task List panel
- Title Bar Icons
- Help Functionality

5.1 Page Layout

A page is defined as the entire screen that appears in the Web browser. The page contains a page header area with the day and date displayed, a Main Menu bar, a Sub Menu and any associated panels. The bottom of the page contains the Page Footer with the EDS copyright text displayed.

The Main Menu bar contains a horizontal set of links which display pull-down menus. Each pull down menu opens an associated page within the system.

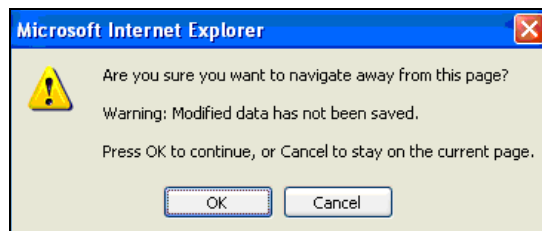
Beneath the Main Menu bar is the Sub Menu of horizontal links that opens an associated page within the system. The Sub Menu links appear in the same order as the Main Menu pull down options, and the Sub Menu links are spelled the same as the Main Menu pull down options.



In general, when navigating a page, the vertical scroll bar should be the only scroll bar needed to view panels stacked in a vertical manner.



If a user attempts to add, update, or delete information within the page prior to navigating away from the page, the system prompts the user with a pop-up window message. When the system generates the message detail panels are locked open, and navigating away from the page is not permitted until changes are either correctly saved or cancelled.



5.2 Shortcut Keys

If the user activates the shortcut keys function, the Sub Menu links can be used in combination with (Ctrl +Alt + shortcut key) to quickly open the associated page.

To activate the shortcut key, click on the Site link, select Personal Settings, check “Activate Shortcut Keys” and click the blue “Update” button.

Personal Settings

Activate Dropdown Menus ☒

Activate Linearized Tables ☐

Activate Focus Return ☐

Activate Shortcut Keys ☒

Shortcut Key Display Mode Underline

update

Last Update: Tuesday, October 31, 2006 4:01:52 PM

To know which letter to use in combination with the (Ctrl + Alt) shortcut keys, the user must look at the Sub Menu name. Within the name, the letter that has a horizontal bar below it is the shortcut key letter.

Within the Reference Sub Menu, the user can use the shortcut keys to quickly navigate from the Reference Modifier panel to the Related Data panel by using the following shortcut key combination: (Ctrl + Alt + L) since the letter “L” is found within the horizontal bars on the Sub Menu related data link.

Reference Modifier Search

Modifier Description Sounds-Like

Type Short Long

Match criteria Begins With Contains

Records 20

search clear add

Related Data

Select area to add or modify below.

Codes	Accident Type	Admit Source	Admit Type
Other	AHFS Therapeutic Class	ASC Payment Group	Attachment
Rpt Dist	Benefit Type	Claim Location	Claim Type
Xref	CMS FDA Therapeutic Equivalency	CMS Type of Service	Condition
	County	DEA	DESI
	Disposition Status	Dosage Form	Drug Activation

save cancel

5.3 Search Options

There are several search options available within interChange.

5.3.1 Search Panels

The interChange system contains more than one type of search panel: Search and Advanced Search. Some subsystems such as the Reference subsystem contain a search panel with an advanced search button included on the panel, such as the image below.

Next Search By: **Diagnosis** search clear adv search

5.3.2 Search Results

Search results can be sorted in ascending or descending order by clicking the column name in the Search Results panel. All search results are resorted, not just the search results displayed on the current search result panel.

Provider Contract	Financial Payer	Description	Claim Type	Editing Ind	Effective Date	End Date	Inactive Date
TEST	Test 2	Test Waiver	Exclude		01/01/2007	12/31/2007	12/01/2007
JXS	ALL plans	Short Description			01/01/2007	01/01/2007	01/01/2007
AEIOU	Test	Test Data	Exclude		01/01/2007	12/31/2007	01/20/2007
ADD1	Test	MO Test	Exclude		11/08/2006	11/08/2007	10/08/2007
GOOD	ALL plans	A New Contract			12/01/2006	12/31/2007	12/31/2007
DIAG	ALL plans	diagnosis			01/01/1900	12/31/2299	12/31/2299
PHRM1	DEFAULT	Pharmacy	Include		01/01/1900	12/31/2299	12/31/2299
ADD	ALL plans	Changing	Include		01/01/2008	01/01/2009	01/01/2009
DDDDD	ALL plans	Test Data	Include		01/01/2007	01/05/2007	01/04/2007
ACR	Test 5	TEST ADD OF CONTRACT	Include		12/21/2007	06/10/2008	12/21/2008

1 2 3 4 5 6 7 8 9 Next >

Select row above to update -or- click Add button below.

If the user clicks once on a search result row, the associated information panel opens. In the following figure, the user clicked the third row of the Benefit Plan Coverage Rules panel and detailed information displayed at the bottom of the panel.

Recipient Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date
ALL	ALL BENEFIT PLANS	Benefit Plan	None	DEFAULT	No	No	01/02/1900	12/31/2299
QONLY	QMB Only	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
SBRW	SOBRA Pregnant Women	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TAWV	Technology Assisted Waive	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TXIX	Full Medicaid	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
XIXQ	Full Medicaid with QMB PI	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299

01/01/1900
12/31/2299

Restriction Choices

Rule	Age	Claim Type	Gender
i6511	10y-55y	A, B, C, I, M, O	F

5.3.3 Mini Search

After the user has viewed at least one search result in an information panel, another search can be completed by using the primary search fields within the Mini Search panel located above the information panel containing the search result. Mini Search panels contain one or two primary search fields related to the business process. The Reference Mini Search panel for Modifier contains one search field, as displayed below.

The screenshot shows the top navigation bar of the AMMIS Reference User Manual. The navigation bar includes links for Home, Claims, Drug, EDI, EPSDT, Financial, Managed Care, MAR, Prior Authorization, Provider, Recipient, Reference (highlighted), TPL, Security, CTMS, Site, and Admin. Below the navigation bar, there is a search section with a dropdown menu for 'Next Search By:' set to 'Modifier'. There are buttons for 'search', 'clear', and 'adv search'.

5.3.4 Pop Up Search

A Pop Up Search allows the user to search for field data without leaving the page. By clicking on the (Search) link, the user accesses the search panel that is associated with that particular field.

The screenshot shows a search panel titled 'Modifier to Modifier Restriction'. It has a table with columns: Modifier Code Start, Modifier Code End, Effective Date, and End Date. The table lists various modifier codes (21, 22, 23, 24, 25, 26, 32, 47, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59) and their corresponding dates. Below the table, there are input fields for 'Modifier Code Start*' and 'Modifier Code End*' with search buttons. A 'Search' button is also present. The search results are displayed in a table with columns: Modifier, Category, and Description. The results list various modifier codes and their descriptions, such as '00 H DEFAULT MODIFIER IN PLACE OF SPACES', '1A H BEDRIDDEN', '1B H MYOCARDIAL INFARCTION', '1C H PARALYSIS', '1P H PODIATRY - ONE CLASS A FINDING', '20 H MICROSURGERY: WHEN THE SURGICAL SERVICE', '21 H PROLONGED E&M SERVICES', '22 H UNUSUAL PROCEDURAL SERVICES', '23 H UNUSUAL ANESTHESIA', and '24 H UNRELATED E&M SAME MD POSTOP'. There are also buttons for 'delete' and 'add'.










5.4 Panel Layout

A panel is defined as a portion of a page that performs a well-defined unit of functionality. Some panels always appear on a page, while others only appear when invoked by the user.

5.4.1 Panel Type and Functions

The system contains various panel types with specific functions for each panel type. Some panels have common icons while other panels have icons specific to their functions. Listed below are icons that can be found on one or more types of panels:

Name	Icon	Description
Add Button		Inserts a new data record.
Delete Button		Deletes a selected data record.
Cancel Button		Cancels all changes applied to all panels on the page. Can be found on the navigation panel.
Save Button		Saves all changes to all panels on the page. If validation errors occur, an error message displays in the Task List panel. Can be found on the navigation panel.
New		Allows the user to create a new record.
Preferences		Allows user to place a checkmark next to each navigation panel they would like to see whenever they browse the Reference

Name	Icon	Description
Button		subsystem. To hide the boxes, click the checkbox a second time. Can be found only on the Navigation panel.
Top Button		Allows user to jump to the top of the page.
Bottom Button		Allows user to jump to the bottom of the page.
Help Button		Opens a window that displays the panel help page.
Maximize Button		Expands a panel to display all of its content.
Minimize Button		Collapses a panel.
Navigation Button		Allows a user to jump to the Navigation panel.
Audit History Button		Opens the Audit History Panel for a specific panel.
Close Button		Closes a panel.
Green Information Button		Opens information file for the associated field.

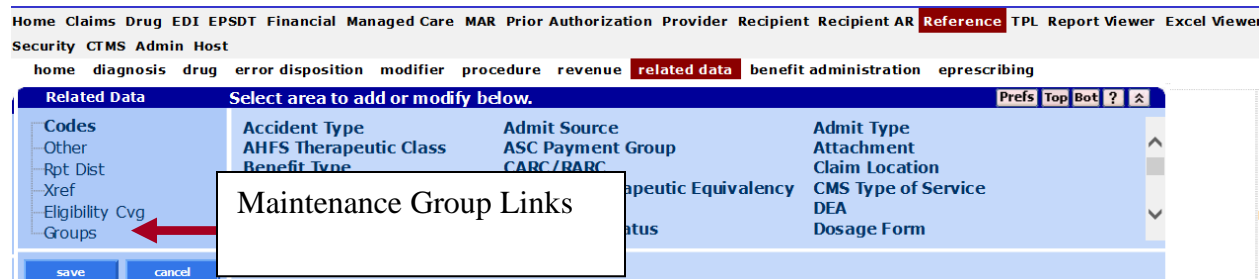
Among the panel types are the following:

- Maintenance panel
- Task List panel
- Maintenance Item Panel
- Audit panel

5.4.2 Maintenance Panel

A maintenance panel is a special control panel that uses links to open or close panels on a Web page. By clicking on a Maintenance Group Link, the associated Maintenance Item panel is displayed. Changes to Maintenance Items displayed on the page are saved or cancelled by clicking the Save or Cancel buttons on the Maintenance panel.

The Maintenance panel is used to navigate within a page, never to leave the page. The following image demonstrates Maintenance Group Links (Codes, Other, Rpt Dist and Xref) and the associated Maintenance Item links.



By clicking on a Maintenance Item Link (such as Benefit Type), the associated panel opens.

Related Data Select area to add or modify below. Prefs Top Bot ? ^

Codes	Accident Type	Admit Source	Admit Type
Other	AHFS Therapeutic Class	ASC Payment Group	Attachment
Rpt Dist	Benefit Type	Claim Location	Claim Type
Xref	Claim Type	CMS FDA Therapeutic Equivalency	Condition
Eligibility Cvg	Condition	CMS Type of Service	DESI
Groups	DESI	County	Drug Activation
	Disposition Status	Dosage Form	

Benefit Type Top Nav ? A ^ X

Benefit Type	Description
D	Diagnosis
I	ICD-9 Procedure
N	Drug
P	Procedure
R	Revenue Code

Select row above to update -or- click Add button below.

Benefit Type:
Description:

5.4.3 Task List Panel

Task List panels appear within navigation panels and provide messages to the user regarding whether the data was successfully saved, or if errors occurred to prevent the data from being successfully saved, or warning messages which may or may not include a radio button selection for the user to activate prior to completing the task.

Related Data Select area to add or modify below. Prefs Top Bot ? ^

Codes	Accident Type	Admit Source	Admit Type
Other	AHFS Therapeutic Class	ASC Payment Group	Attachment
Rpt Dist	Benefit Type	Claim Location	Claim Type
Xref	CMS FDA Therapeutic Equivalency	CMS Type of Service	Condition
	County	DEA	DESI
	Disposition Status	Dosage Form	Drug Activation

The following messages were generated:

Message Description	Panel	Field	Row
SmartKey Dosage Form must be greater than or equal to 1.	Dosage Form	SmartKey Dosage Form	
Dosage Form is required.	Dosage Form	Dosage Form	

The task list contains both the name of the panel where the error occurred, and the field name or row in order to help users quickly identify key areas to correct prior to attempting another save action.

Warning messages provide users with a warning about the data they are trying to update, delete, add, or save. For example, if the user attempts to add duplicate record, the system generates a warning message.

An error message can also contain additional information which is accessed by clicking on a square node icon in the lower left side of the Task List panel.

5.4.4 Maintenance Item Panel

A Maintenance Item panel is opened by clicking a link on the Maintenance panel. Maintenance Items allow detail data to be viewed and updated. Usually a Maintenance Item has a list of data records and a panel to perform data updates. Click the Add button to enter a new data record. Or click a data record from the list to perform field updates or to delete the record. Once selected, a data record is deleted by clicking the Delete button. All adds, deletes and updates must be followed by a Save before the transaction is permanent.

InterChange
Government Health Portfolio

Friday, February 09, 200...

Home Claims Drug EDI EPSDT Financial Managed Care MAR Prior Authorization Provider Recipient **Reference** TPL Security CTMS Site Admin

Host

home diagnosis drug error disposition modifier procedure revenue **related data** benefit administration

Related Data Select area to add or modify below. Prefs Top Bot ?


Codes	Accident Type	Admit Source
Other	AHFS Therapeutic Class	ASC Payment Group
Rpt Dist	Benefit Type	Claim Location
Xref	CMS FDA Therapeutic Equivalency	CMS Type of Service
	County	DEA
	Disposition Status	Dosage Form

save cancel

Maintenance Item

5.4.5 Audit Panel

Audit panels display data change history for a given Navigator Item panel. Every insert, update or delete that is performed (on an updatable panel) in the system causes a "before" image of the data to be saved to the audit table. Users can then use the audit panel to display this information.

Audit panels are opened by clicking the  button in the Navigator Item panel.

Base Information Audit History Top Nav ? X

Columns

<input type="checkbox"/> Modifier	<input type="checkbox"/> Category	<input type="checkbox"/> Effective Date
<input type="checkbox"/> End Date	<input type="checkbox"/> CMS Add Date	<input type="checkbox"/> CMS Termination Date
<input type="checkbox"/> Description	<input type="checkbox"/> Long Description	<input type="checkbox"/> Modifier Type
<input checked="" type="checkbox"/> User Name	<input checked="" type="checkbox"/> System Date	<input checked="" type="checkbox"/> Action Code

Start Date

End Date

Show All ☐

Records 20

search *
deselect all
select all

Audit Results

*** No Rows Found ***

5.5 Help Functionality

The interChange system contains two paths to locate help: Question Mark Icon and Field Level Help.

5.5.1 Question Mark Icon ?

The Question Mark icon is used to access page/panel level help. Click the Question Mark icon to launch a separate Internet browser that contains information on the page/panel.

5.5.1.1 Panel Help Feature - Question Mark Function Description

Upon accessing the **Panel Help** function a description of the panel is displayed within the window:

Reference Modifier Search-Modifier
This panel will allow the user to search for a specific Modifier code.
Navigation Path: [Reference - Modifier] - [search button]

The second item displayed is the **Panel Layout**:

Reference Modifier Search ? ?
Modifier Description Sounds-Like ☐
Type ☒ Short ☐ Long
Match criteria ☒ Begins With ☐ Contains
Records 20

The third item displayed is the **Field Description** information related to the panel:

Field	Description	Field Type	Data Type	Length
add	Opens all necessary panels to allow the user to enter data and create a new Procedure Modifier in Interchange.	Button	N/A	0
clear	Clears the search criteria fields so user may key-in new criteria.	Button	N/A	0
search	Initiates 'search' for a Modifier matching the search criteria keyed-in.	Button	N/A	0
Sounds-Like	If the box is checked, phonetic search is performed and if the check box is unchecked word search is performed.	Check Box	Check Box	0
Records	Indicates the number of records to be displayed in search results.	Combo Box	Drop Down List Box	0
Description	Short text that describes the modifier, used as search criteria in the search.	Field	Character	40
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Field	Radio Button	0
Modifier	A code used to identify a procedure modifier (condition requiring medical attention), used as search criteria in the search.	Field	Character	2
Type	Allows searching on the short or the long description.	Field	Radio Button	0

The fourth item displayed is the **Field Edit** information related to the panel. This portion of documentation provides the field name, the error messages associated to the field(s) and a brief explanation of how to correct the data in the field in order to bypass the error message displayed in the UI.

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found.	No modifier matching the 'Description' keyed-in was found. Verify input.
Modifier	Field	1	No rows found	No modifier matching the 'Modifier' code keyed-in was found. Verify input

The information available via the Question Mark icon is virtually the same panel information accessible in iTRACE. For example, the bottom of the page contains data such as, Requirements, Test Cases, Change Orders/Defects and any associated documentation that relates to a panel.

To close out of the Help panel, click the  in the browser title bar.

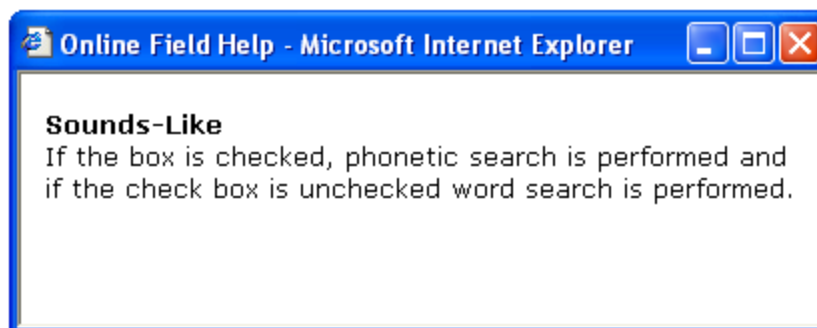
5.5.2 Field Level Help


Field Level Help is used to access field definitions related to a specific field selected. Click the Field Name to launch a popup window that contains information on the field selected.

5.5.2.1 Field Level Help Description

When hovering the cursor over a field name, such as **Current ID**, a question mark appears as part of the cursor.

Click once on the text area of the field and a popup window appears with a description of the field, such as the one provided below:



To close out of the Field Level Help window, click the  in the Online Field Help title bar.

6. Reference Data Maintenance Pages/Panels

This section gives a brief description of each window, shows a sample, and describes all associated window fields and field edits.

Note: Any names, addresses, or other personal information displayed in window images are fictitious and are not representative of an actual person.

The page/panels Field Description table is sorted in alphabetical order. There may be some instances in which the publication script has altered this sort order and these anomalies were not changed during production of this document.

Each window covers the following:

- Page/Panel Narrative
- Page/Panel Layout
- Page/Panel Field Descriptions
- Page/Panel Field Edit Error Code Tables
- Page/Panel Extra Features
- Page/Panel Accessibility

6.1 Reference Diagnosis Search Panel

6.1.1 Reference Diagnosis Search Panel Narrative

The Reference Diagnosis Search panel allows the user to search for diagnosis information based upon select criteria such as description.

This panel is positioned at the top of the Reference Diagnosis Search panel and permits the user to execute a search based upon the entered search parameters.

Additionally, security permitting, the user may opt to proceed directly to the Diagnosis Information panels to add a new Diagnosis.

Navigation Path: [Reference] – [Diagnosis] – [Reference Diagnosis Search]

6.1.2 Reference Diagnosis Search Panel Layout

The screenshot shows the 'Reference Diagnosis Search' panel. It features a blue header bar with the title and a help icon. Below the header, there are several input fields and controls: a 'Diagnosis' text field, an 'ICD Version' dropdown menu, a 'Description' text field, a 'Type' section with radio buttons for 'Short', 'Long', and 'Lay', a 'Match criteria' section with radio buttons for 'Begins With' and 'Contains', a 'Sounds-like' checkbox, a 'Records' dropdown menu set to '20', and three buttons: 'search', 'clear', and 'add'.

6.1.3 Reference Diagnosis Search Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Directs the user to the Diagnosis Information panels necessary to create a new Diagnosis Code.	Button	N/A	0
Clear	Clears the criteria fields so user may enter new criteria.	Button	N/A	0
Description	Text that describes a specific Diagnosis. The user may enter all or part of the description.	Field	Character	40
Diagnosis	Code used to identify the Diagnosis (condition requiring medical attention). The user may enter all or part of the code.	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are ICD-9 and ICD-10.	Combo Box	Drop Down List Box	1
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Field	Radio Button	0
Records	Allows the user to specify the number of rows returned from the search.	Combo Box	Drop Down List Box	0
Search	Initiates search on the database table for records matching the criteria entered.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
Sounds Like	Allows the user to perform a phonetic search on description. If the box is checked, a phonetic search is performed using the input description. If the check box is unchecked a literal search is performed.	Checkbox	Checkbox	0
Type	Allows searching on the short description, the long description or the lay description.	Combo Box	Radio Button	0

6.1.4 Reference Diagnosis Search Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found.	Verify keying.
Diagnosis	Field	1	No rows found.	Verify keying.

6.1.5 Reference Diagnosis Search Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.1.6 Reference Diagnosis Search Panel Accessibility

6.1.6.1 To Access the Reference Diagnosis Search Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.

6.2 Reference Diagnosis Search Results Panel

6.2.1 Reference Diagnosis Search Results Panel Narrative

The Reference Diagnosis Search panel allows the user to search for diagnosis information based upon select criteria such as description.

The Reference Diagnosis Search Results panel is positioned at the bottom of the Reference Diagnosis Search panel and displays a listing of Diagnosis Codes and descriptions matching the specified criteria.

Clicking/Selecting a row from the list directs the user to Diagnosis Information panel where the user may access additional diagnosis details.

This panel is inquiry only.

Navigation Path: [Reference] – [Diagnosis] - [(Enter search criteria, click on 'search' button)] - Search Results

6.2.2 Reference Diagnosis Search Results Panel Layout

Search Results		
ICD Version	Diagnosis ^A	Description
9	257	TESTICULAR DYSFUNCTION
0	257	TESTICULAR HYPERFUNCTION
0	V1643	TESTIS
0	V2631	TESTING FOR GENETIC DISEASE CARRIER STAT
9	V2634	TESTING OF MALE FOR GENETIC DISEASE CARR
9	V7645	TESTIS

Search Results		
ICD Version	Diagnosis ^A	Long Description
9	257	TESTICULAR DYSFUNCTION
0	257	TESTICULAR HYPERFUNCTION
0	V1643	TESTIS
0	V2631	TESTING FOR GENETIC DISEASE CARRIER STATUS
9	V2634	TESTING OF MALE FOR GENETIC DISEASE CARRIER STATUS
9	V7645	TESTIS

Search Results		
ICD Version	Diagnosis ^A	Lay Description
0	257	TESTICULAR HYPERFUNCTION
9	257	TESTICULAR DYSFUNCTION

6.2.3 Reference Diagnosis Search Results Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Short description of the relevant diagnosis. This is displayed if "Short" is selected from the "Type" radio buttons.	Field	Character	60
Diagnosis	Code that identifies the Diagnosis (condition requiring medical attention). Represents a medical classification of a disease or condition.	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values will be '9' for ICD-9 and '0' for ICD-10.	Field	Character	1
Lay Description	Lay description of the relevant diagnosis. This is displayed if "Lay" is selected from the "Type" radio buttons.	Field	Alphanumeric	100

Field	Description	Field Type	Data Type	Length
Long Description	Long description of the relevant diagnosis. This is displayed if "Long" is selected from the "Type" radio buttons. For a lengthy description truncation occurs and only the first 100 characters are displayed.	Field	Alphanumeric	250

6.2.4 Reference Diagnosis Search Results Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.2.5 Reference Diagnosis Search Results Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.2.6 Reference Diagnosis Search Results Panel Accessibility

6.2.6.1 To Access the Reference Diagnosis Search Results Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Diagnosis Search Results panel displays.

6.3 Diagnosis Search Panel

6.3.1 Diagnosis Search Panel Narrative

The Diagnosis Search panel allows the user to search for diagnosis information based upon select criteria such as description.

The Diagnosis Search Results panel is positioned at the bottom of the Reference Diagnosis Search panel and displays a listing of Diagnosis Codes descriptions and ICD Version matching the specified criteria.

Clicking/Selecting a row from the list directs the user to Diagnosis Information panel where the user may access additional diagnosis details.

Navigation Path: [Reference] – [Related Data] - [Other] - [Diagnosis Group Type] - [select a group] - click Diagnosis Code Range From / To

6.3.2 Diagnosis Search Panel Layout

ICD Version	Diagnosis	Description
0	E8369	MACHINERY ACCIDENT IN WATER TRANSPORT IN
0	E8370	EXPLOSION, FIRE, OR BURNING IN WATERCRAF

6.3.3 Reference Diagnosis Search Results Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Description of the relevant diagnosis.	Field	Character	60
Diagnosis	Code that identifies the Diagnosis (condition requiring medical attention). Represents a medical classification of a disease or condition according to ICD-9 /ICD-10.	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values will be '9' for ICD-9 and '0' for ICD-10	Field	Character	1
Clear	Clear the selection criteria entered.	Button	N/A	0
Search	Search for reason code using the selection criteria specified.	Button	N/A	0

6.3.4 Reference Diagnosis Search Results Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.3.5 Reference Diagnosis Search Results Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.3.6 Diagnosis Search Panel Accessibility

6.3.6.1 To Access the Diagnosis Search Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Related Data.	Related Data Panel displays.
3	Select Other.	A list of hyperlinks to panel displays.
4	Select Diagnosis Group Type.	Diagnosis Group Panel displays.

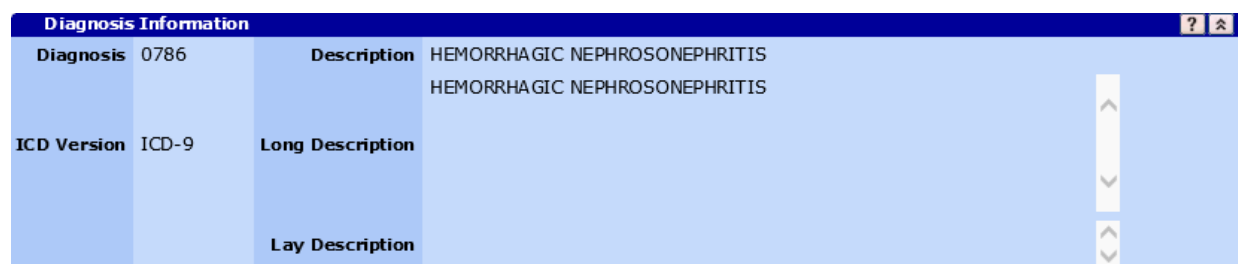
6.4 Diagnosis Information Panel

6.4.1 Diagnosis Information Panel Narrative

The Diagnosis Information panel is used to view the information for the selected Diagnosis. This panel is display only.

Navigation Path: [Reference] – [Diagnosis] - [(click on 'search' button)] - [(select row from search results)] - [Diagnosis Information]

6.4.2 Diagnosis Information Panel Layout



6.4.3 Diagnosis Information Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	The description of the diagnosis code. The short nomenclature for a medical condition.	Field	Character	60
Diagnosis	A code used to identify a condition requiring medical attention. Represents a medical classification of a disease or condition according to ICD. (Field displays up to 7-digit ICD-10 codes for future use.)	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced.	Field	Character	1
Lay Description	A layman's description of the diagnosis.	Field	Alphanumeric	100
Long Description	The long description for the diagnosis code.	Field	Character	400

6.4.4 Diagnosis Information Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.4.5 Diagnosis Information Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.4.6 Diagnosis Information Panel Accessibility

6.4.6.1 To Access the Diagnosis Information Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.

6.5 Diagnosis Maintenance Panel

6.5.1 Diagnosis Maintenance Panel Narrative

Links to the Diagnosis application information maintenance panels. This panel is inquiry only.

Navigation Path: [Reference] – [Diagnosis] - [(click on 'search' button)] - [(select row from search results)] - [Diagnosis Maintenance]

6.5.2 Diagnosis Maintenance Panel Layout

Diagnosis Maintenance

Select an area to add or modify

Prefs Top Bot ? 🔍

Diagnosis

Base Information
Group
Restriction

Benefit Plan Coverage Rules
Note

Contract Billing Rules
Reimbursement Rules

save cancel new

6.5.3 Diagnosis Maintenance-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Base Information	Opens the Base Information panel.	Hyperlink	N/A	0
Benefit Plan Coverage Rules	Opens the Benefit Plan Coverage Rules panel.	Hyperlink	N/A	0
Cancel	Clears out ('undo') all changes made to any panel in the navigation panel links.	Button	N/A	0
Contract Billing Rules	Opens the Contract Billing Rules panel.	Hyperlink	N/A	0
Group	Opens the Group panel.	Hyperlink	N/A	0
New	Opens up required empty panels so user may enter data and create a new 'Diagnosis'.	Button	N/A	0
Note	Opens the Note panel.	Hyperlink	N/A	0
Reimbursement Rules	Opens the Reimbursement Rules panel.	Hyperlink	N/A	0
Restriction	Opens the Restriction panel.	Hyperlink	N/A	0
Save	Saves all changes made (to any panel in the Navigation panel) to the database.	Button	N/A	0

6.5.4 Diagnosis Maintenance Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.5.5 Diagnosis Maintenance Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.5.6 Diagnosis Maintenance Panel Accessibility

6.5.6.1 To Access the Diagnosis Maintenance Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Maintenance panel displays.

6.6 Diagnosis Mini Search Panel

6.6.1 Diagnosis Mini Search Panel Narrative

Diagnosis Mini-Search panel provides the user with the ability to search for a Diagnosis from the Diagnosis Information page. This panel is inquiry only.

Navigation Path: [Reference] – [Diagnosis Search] - [click on 'search' button] - (select row from search results)] - [Next Search By]

6.6.2 Diagnosis Mini Search Panel Layout



6.6.3 Diagnosis Mini Search Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	Opens the main 'Diagnosis Search' panel so user may set additional search criteria.	Button	N/A	0
Clear	Clears the 'Diagnosis' field.	Button	N/A	0
Diagnosis	Code used to identify the Diagnosis (condition requiring medical attention). The user must enter all of the code.	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are BLANK, ICD-9 and ICD-10.	Combo Box	Drop Down List Box	1
Search	Initiates search on the database for record matching the 'Diagnosis' code keyed-in.	Button	N/A	0

6.6.4 Diagnosis Mini Search Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Diagnosis	Field	2	Diagnosis number is required.	Enter a diagnosis number.
	Field	3	Diagnosis number does not exist.	Enter a valid diagnosis number.
ICD Version	Field	1	ICD Version is required	Select value from ICD Version dropdown.

6.6.5 Diagnosis Mini Search Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.6.6 Diagnosis Mini Search Panel Accessibility

6.6.6.1 To Access the Diagnosis Mini Search Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel display.
4	Select row.	Diagnosis Mini Search panel displays.

6.7 Base Information-Diagnosis Panel

6.7.1 Base Information-Diagnosis Panel Narrative

The Base Information-Diagnosis panel is used to maintain Diagnosis Code Information. Only users with update authority are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Diagnosis] - [Reference Search] - [(click on 'search' button)] - [(select row from search results)] - [Base Information]

6.7.2 Base Information-Diagnosis Panel Layout



6.7.3 Base Information-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Delete	Marks the 'Diagnosis' record for deletion.	Button	N/A	0
Description	The short nomenclature for a medical condition.	Field	Character	60
Diagnosis	A code for the condition requiring medical attention. The medical classification of a disease or condition according to ICD. (It holds 7 digit ICD codes, but smaller values can be entered).	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are BLANK, ICD-9 and ICD-10.	Combo Box	Drop Down List Box	1
Lay Description	A layman's description of the diagnosis.	Field	Alphanumeric	100
Long Description	The long nomenclature for a medical condition.	Field	Character	400

6.7.4 Base Information-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	Description is required.	Enter a Description.
Diagnosis	Field	1	Diagnosis is Required.	Enter a Diagnosis Code.
	Field	2	A duplicate record cannot be saved.	Enter a non duplicate Diagnosis.

Field	Field Type	Error Code	Error Message	To Correct
ICD Version	Combo Box	1	ICD Version is required.	Select value from ICD Version dropdown.
Long Description	Field	1	Long description is required.	Enter a Long description.

6.7.5 Base Information-Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.7.6 Base Information-Diagnosis Panel Accessibility

6.7.6.1 To Access the Base Information-Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Base Information .	Base Information-Diagnosis panel displays.

6.7.6.2 To Add on the Base Information-Diagnosis Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Enter Diagnosis .	
3	Enter Description .	
4	Select ICD Version .	
5	Enter Long Description .	
6	Enter Lay Description .	
7	Click Save .	Base Information-Diagnosis information is saved.

6.7.6.3 To Delete on the Base Information-Diagnosis Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.8 Benefit Plan Coverage Rules-Diagnosis Panel

6.8.1 Benefit Plan Coverage Rules-Diagnosis Panel Narrative

The Benefit Plan Coverage Rules-Diagnosis panel is used to view the recipient plan coverage information for a specific diagnosis code. This panel is display only.

Navigation Path: [Reference] – [Diagnosis] - (click on [search] and select row from search results) - [Diagnosis Maintenance] - [Diagnosis] - [Benefit Plan Coverage Rules]

6.8.2 Benefit Plan Coverage Rules-Diagnosis Panel Layout

Benefit Plan Coverage Rules								
Recipient Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date
ALL	ALL BENEFIT PLANS	Benefit Plan	None	DEFAULT	No	No	01/02/1900	12/31/2299
QONLY	QMB Only	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
SBRW	SOBRA Pregnant Women	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TAWV	Technology Assisted Waive	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TXIX	Full Medicaid	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
XIXQ	Full Medicaid with QMB PI	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299

6.8.3 Benefit Plan Coverage Rules-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Identifies the associated list of claim types as included or excluded for the covered benefit.	Combo Box	Drop Down List Box	0
Copay Allowed	Yes/No indicator used to identify programs that qualify for copay calculations during claims payment determination.	Field	Character	3
Description	Description of the Recipient Plan.	Field	Character	50
Effective Date	Date the Recipient Plan becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective date.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Recipient Plan becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the end date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this benefit plan.	Field	Character	30
Plan Type	Type of plan is either an Assignment Plan (ASGN) or a Benefit Plan (BNFT).	Field	Character	15
Recipient Only	Yes/No indicator used to identify programs that are used for recipient enrollment only. No services are covered by the program.	Field	Character	3
Recipient Plan	Code that identifies the recipient plan that is supported in the system.	Field	Character	5

6.8.4 Benefit Plan Coverage Rules-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.8.5 Benefit Plan Coverage Rules-Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.8.6 Benefit Plan Coverage Rules-Diagnosis Panel Accessibility

6.8.6.1 To Access the Benefit Plan Coverage Rules-Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Benefit Plan Coverage Rules .	Benefit Plan Coverage Rules-Diagnosis panel displays.

6.9 Contract Billing Rules-Diagnosis Panel

6.9.1 Contract Billing Rules-Diagnosis Panel Narrative

The Contract Billing Rules- Diagnosis panel is used to display Provider Contracts applicable to diagnosis codes. This panel is display only.

Navigation Path: [Reference] - [Diagnosis] - (Click on [Search] button) - (Select row from search results) - [Diagnosis Maintenance] - [Diagnosis] - [Contract Billing Rules]

6.9.2 Contract Billing Rules-Diagnosis Panel Layout

Contract Billing Rules							Top	X
Provider Contract	Financial Payer	Description	Claim Type Edits	Effective Date	End Date	Inactive Date		
ADMH	DEFAULT	ADMH/MR		01/01/1900	12/31/2299	12/31/2299		
ADSS	DEFAULT	E and D		01/01/1900	12/31/2299	12/31/2299		
ASC	DEFAULT	ASC		01/01/1900	12/31/2299	12/31/2299		
AUDIO	DEFAULT	Audiology		01/01/1900	12/31/2299	12/31/2299		
CARE	DEFAULT	Care Coordination		01/01/1900	12/31/2299	12/31/2299		
CHIRO	DEFAULT	Chiropractic		01/01/1900	12/31/2299	12/31/2299		
CORF	DEFAULT	Rehab Hospital		01/01/1900	12/31/2299	12/31/2299		
CRNA	DEFAULT	CRNA		01/01/1900	12/31/2299	12/31/2299		
CRS	DEFAULT	CRS		01/01/1900	12/31/2299	12/31/2299		
DME	DEFAULT	Durable Med Equip		01/01/1900	12/31/2299	12/31/2299		
1 2 3 4 5 6 Next >								

6.9.3 Contract Billing Rules-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Attribute indicates what type of claim type to program editing is to be performed. If the indicator is set to 'N' (non), no claim type to program editing is performed. If the indicator is set to 'I' (include), only the claim types listed are billable for the specified program. If the indicator is set to 'E' (exclude), the claim types listed are not billable for the specified program.	Field	Character	1
Description	Description of the provider contract.	Field	Character	30
Effective Date	Date the Provider Contract becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective dates.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Provider Contract becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the end date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this provider contract.	Field	Character	30
Inactive Date	Date/Time the Provider Contract can no longer be used regardless of dates of service on the claim.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Provider Contract	Classification of services a Provider can bill. A provider may have multiple contracts.	Field	Character	5

6.9.4 Contract Billing Rules-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.9.5 Contract Billing Rules-Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.9.6 Contract Billing Rules-Diagnosis Panel Accessibility

6.9.6.1 To Access the Contract Billing Rules-Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information and Maintenance panels display.
5	Click Contract Billing Rules .	Contract Billing Rules panel displays.

6.10 Group-Diagnosis Panel

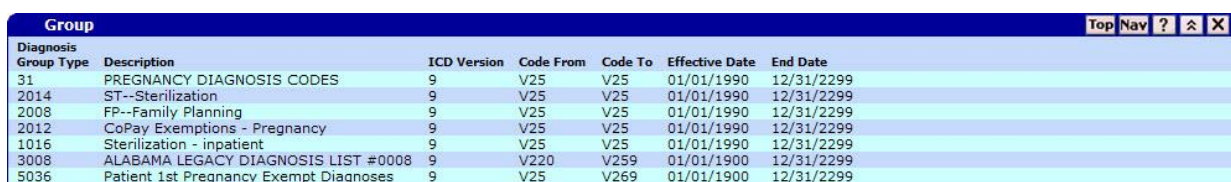
6.10.1 Group-Diagnosis Panel Narrative

The Diagnosis Group Panel is used to view the groups to which the Diagnosis belongs. These groups are then used in pricing and processing logic. The groups may be maintained on the Diagnosis Group Type panel found in Related Data.

This panel is display only.

Navigation Path: [Reference] – [Diagnosis] - [(click on 'search' button)] - [(select a row from search result list)] - [Diagnosis Maintenance] - [Group]

6.10.2 Group-Diagnosis Panel Layout



Diagnosis Group Type	Description	ICD Version	Code From	Code To	Effective Date	End Date
31	PREGNANCY DIAGNOSIS CODES	9	V25	V25	01/01/1990	12/31/2299
2014	ST--Sterilization	9	V25	V25	01/01/1990	12/31/2299
2008	FP--Family Planning	9	V25	V25	01/01/1990	12/31/2299
2012	CoPay Exemptions - Pregnancy	9	V25	V25	01/01/1990	12/31/2299
1016	Sterilization - inpatient	9	V25	V25	01/01/1990	12/31/2299
3008	ALABAMA LEGACY DIAGNOSIS LIST #0008	9	V220	V259	01/01/1900	12/31/2299
5036	Patient 1st Pregnancy Exempt Diagnoses	9	V25	V269	01/01/1900	12/31/2299

6.10.3 Group-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Code From	A lower range of code which identifies a specific condition requiring medical attention. Represents a medical classification of a disease or condition according to ICD or HCPCS.	Field	Number (Integer)	7
Code To	An upper range of code which identifies a specific condition requiring medical attention. Represents a medical classification of a disease or condition according to ICD or HCPCS. This is the ending Diagnosis code value.	Field	Number (Integer)	7
Description	The description for the diagnosis Group.	Field	Character	50
Diagnosis Group Type	System assigned key for a unique diagnosis type, that represents a single or collection of diagnosis.	Field	Number (Integer)	9
Effective Date	The date that the diagnosis code is to become effective for the diagnosis type in claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The last date that the diagnosis code is in effect for the diagnosis type in claims processing.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are '9' for ICD-9 and '0' for ICD-10.	Field	Character	1

6.10.4 Group-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.10.5 Group-Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.10.6 Group-Diagnosis Panel Accessibility

6.10.6.1 To Access the Group-Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Group .	Group-Diagnosis panel displays.

6.11 Note-Diagnosis Panel

6.11.1 Note-Diagnosis Panel Narrative

The Diagnosis - Note panel is used to enter notes as to why changes were made to a specific diagnosis. The panel includes fields for date, time, clerk number, and note sequence number.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Diagnosis Search] - [(Add button) OR (select row from search results)] – [Diagnosis Maintenance] - [Note]

6.11.2 Note-Diagnosis Panel Layout

Sequence Number	Clerk ID	Date	Time	Note
1	LZT4LGR	08/07/2007	17:57:55	testing
2	*MASQLE0	10/02/2007	15:02:24	test
3	*MASQLE0	10/02/2007	15:02:36	abc
4	*MASQLE0	10/02/2007	15:02:45	test again
5	*MASQLE0	10/02/2007	15:18:38	Tested

Select row above to update -or- click Add button below.

Sequence Number: Date:

Clerk ID: Time:

Note:

delete add

6.11.3 Note-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows a user to add a note.	Button	N/A	0
Clerk ID	The identification number of the user who enters the note.	Field	Alphanumeric	8
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Delete	Allows a user to delete a note.	Button	N/A	0
Note	The actual text of the note.	Field	Alphanumeric	1000
Sequence Number	Sequence number that can uniquely identify a note.	Field	Number (Integer)	9
Time	The time that the note was entered.	Field	Number (Decimal)	6

6.11.4 Note-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add Diagnosis Note text.

6.11.5 Note-Diagnosis Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for Proc + 1

Clerk ID - System generated based on users logon id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.11.6 Note-Diagnosis Panel Accessibility

6.11.6.1 To Access the Note-Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Note .	Note-Diagnosis panel displays.

6.11.6.2 To Add on the Note-Diagnosis Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note-Diagnosis information is saved.

6.11.6.3 To Update on the Note-Diagnosis Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Note-Diagnosis information is saved.

6.11.6.4 To Delete on the Note-Diagnosis Panel

Step	Action	Response
------	--------	----------

1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.12 Reimbursement Rules-Diagnosis Panel

6.12.1 Reimbursement Rules- Diagnosis Panel Narrative

The Reimbursement Rules-Diagnosis panel is used to view the Reimbursement Agreement information for a specific diagnosis code. The information displayed is retrieved from the Reimbursement Agreement tables available through the Benefit administration panels. The panel displays all reimbursement agreements associated with the specified Diagnosis.

This panel is display only.

Navigation Path: [Reference] – [Diagnosis] - [(select row from search results)] – [Diagnosis Maintenance] - [Reimbursement Rules]

6.12.2 Reimbursement Rules- Diagnosis Panel Layout



Reimbursement Rules				
Restriction Choices				
Rule	Dispensed As Written	ALGI	Pricing Indicator	Rate Type
01/01/1900	i5279 1, 8	2	NDCBND	DEF
12/31/2299	i5280 1, 8	(2)	NDCLW	DEF
	i5278 (1, 8)		NDCLW	DEF

6.12.3 Reimbursement Rules- Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 – Non-drug item 1 – Generic Product 2 – Brand Product.	Field	N/A	0
Dates	These are the effective and end dates for this rule.	Field	Date (MM/DD/CCYY)	8
Dispensed As Written	It provides the Dispensed As Written value.	Field	N/A	0
Pricing Indicator	It provides the Pricing Indicator.	Field	N/A	0
Pricing Modifier	Pricing Modifier requirement for claims. Possible values are N - Pay Billed Amount, Y - Pay greater than Billed Amount & Z - Zero Pay Billed Amount.	Field	N/A	0
Rate Type	It provides the Rate Type.	Field	N/A	0
Rule	It provides the Rule identification.	Field	N/A	0

6.12.4 Reimbursement Rules- Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.12.5 Reimbursement Rules- Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.12.6 Reimbursement Rules- Diagnosis Panel Accessibility

6.12.6.1 To Access the Reimbursement Rules- Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Reimbursement Rules .	Reimbursement Rules-Diagnosis panel displays.

6.13 Restriction-Diagnosis Panel

6.13.1 Restriction-Diagnosis Panel Narrative

The Diagnosis Restriction panel is used to update diagnosis restriction information.

Only authorized users with update privileges have the capability to add new information or change existing data.

Navigation Path: [Reference] – [Diagnosis] - [(click on 'search' button)] - [(select row from search results)] - [Diagnosis Maintenance] - [Restriction]

6.13.2 Restriction-Diagnosis Panel Layout

Restriction

Effective Date	End Date	Ages Min	Ages Max	Gender	Attachment	Emergency	Sub Classification	Family Plan	Pregnancy	Primary Diagnosis
01/01/1964	12/31/2299	0	999	Both	No	No	No	No	No	Yes

Select row above to update -or- click Add button below.

Effective Date: Emergency:

End Date: Sub Classification:

Ages: To Family Plan:

Gender: Pregnancy:

Attachment: Primary Diagnosis:

Delete Add

6.13.3 Restriction-Diagnosis Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new restriction to the diagnosis.	Button	N/A	0
Ages (From)	The minimum age that is valid for the diagnosis. This field is not used in AL.	Field	Number (Integer)	3
Ages (To)	The maximum age that is valid for the diagnosis. This field is not used in AL.	Field	Number (Integer)	3
Attachment	Indicates whether documentation is required for the diagnosis. The valid values are Y/N. This field is not used in AL.	Combo Box	Drop Down List Box	0
Delete	Allows the user to mark a 'restriction' to be removed from the diagnosis.	Button	N/A	0
Effective Date	The date that the limitations for the diagnosis code became effective.	Field	Date (MM/DD/CCYY)	8
Emergency	Indicates whether the diagnosis is for an emergency ASC condition. Valid values are 'Y' - yes and 'N' - no.	Combo Box	Drop Down List Box	0
End Date	The date that the limitations for the diagnosis code stopped being effective.	Field	Date (MM/DD/CCYY)	8
Family Plan	The indicator for determining whether or not	Combo	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
	this diagnosis is a Family Planning diagnosis. The valid values are Y/N. This field is not used in AL.	Box		
Gender	Indicates if the diagnosis code is gender specific. The valid values are Y/N. This field is not used in AL.	Combo Box	Drop Down List Box	0
Pregnancy	Indicates if the diagnosis is for a pregnancy. The valid values are Y/N.	Combo Box	Drop Down List Box	0
Primary Diagnosis	Indicates if the diagnosis is valid to be billed as the primary diagnosis on a claim. The valid values are Y/N.	Combo Box	Drop Down List Box	0
Sub Classification	Indicates whether the diagnosis requires further specification. The valid values are Y/N.	Combo Box	Drop Down List Box	0

6.13.4 Restriction-Diagnosis Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Ages (From)	Field	1	Enter a valid value.	Enter Age (from) for this restriction (must be numeric).
	Field	2	Age From must be less than or equal to Age To.	Age (from) must be <= Age (to).
	Field	3	Age From is required.	Enter an Age From.
Ages (To)	Field	1	Enter a valid value	Enter Age (To) for this restriction. (must be numeric).
	Field	2	Age From must be less than or equal to Age To.	Age (from) must be <= Age (to).
	Field	3	Age To is required.	Enter an Age To.
Attachment	Field	1	Attachment is required.	Choose an Attachment from drop down list.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an Effective Date that is less than or equal to the End Date.
	Field	2	Date range segments cannot overlap.	Verify dates against list. Date segments cannot overlap.
	Field	3	Invalid Date.	Enter an Effective Date that is numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	5	Effective Date is required.	Enter a valid Effective Date.

Field	Field Type	Error Code	Error Message	To Correct
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Verify keying. The date must be less than or equal to 12/31/2299.
Emergency	Field	1	Emergency is required.	Select an Emergency option from drop down list.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	2	Date range segments cannot overlap.	Verify dates against existing segment.
	Field	3	Invalid Date.	Enter an End Date that is numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	5	End Date is required.	Enter a valid End Date.
	Field	6	End Date must be less than or equal to 12/31/2299.	Verify keying. The date must be less than or equal to 12/31/2299.
Family Plan	Field	1	Family Plan is required.	From drop down list, select a Sub Classification for this restriction.
Gender	Field	1	Gender is required.	Select a value from the drop down list.
Pregnancy	Field	1	Pregnancy is required.	Choose a Pregnancy option from drop down list.
Primary Diagnosis	Field	1	Primary Diagnosis is required.	Select a Primary Diagnosis from drop down list.

6.13.5 Restriction-Diagnosis Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.13.6 Restriction-Diagnosis Panel Accessibility

6.13.6.1 To Access the Restriction –Diagnosis Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Diagnosis .	Reference Diagnosis Search panel displays.

Step	Action	Response
3	Click Search .	Reference Diagnosis Search Results panel displays.
4	Select row.	Diagnosis Information panel displays.
5	Click Restriction .	Restriction-Diagnosis panel displays.

6.13.6.2 To Add on the Restriction-Diagnosis Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Effective Date in MM/DD/CCYY format.	
3	Enter End Date in MM/DD/CCYY format.	
4	Select Emergency from drop down list box.	
5	Select Sub Classification from drop down list box.	
6	Select Pregnancy from drop down list box.	
7	Select Primary Diagnosis from drop down list box.	
8	Click Save .	Restriction-Diagnosis information is saved.

6.13.6.3 To Update on the Restriction-Diagnosis Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Restriction-Diagnosis information is saved.

6.13.6.4 To Delete on the Restriction-Diagnosis Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.14 Reference Drug Search Panel

6.14.1 Reference Drug Search-Panel Narrative

The Reference Drug Search panel allows the user to enter search criteria and query for Drug records whose data matches that criteria and displays the results. This panel is inquiry only.

Navigation Path: [Reference] – [Drug]

6.14.2 Reference Drug Search Panel Layout

6.14.3 Reference Drug Search Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AHFS	Identifies the pharmacologic therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	10
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 - Non-drug item 1 - Generic Product 2 - Brand Product	Field	Character	1
Brand Name	Brand name of the relevant drug. Contains only the brand name of the drug(s) returned from the search criteria. This is displayed if the 'Brand Name' radio button is selected.	Field	Character	30
Clear	Clears all fields in search criteria	Button	N/A	0
Covered	Indicates the drug is covered (Yes) or not covered (No) on the request date. The results are in 'Covered' order.	Field	Character	1
Description by	The name of the drug.	Field	Character	30
Drug	Displays the National Drug Code of the drug.	Field	Character	11

Field	Description	Field Type	Data Type	Length
Drug Coverage	Allows the user to select search results that will display drugs that are: covered (Yes), not covered (No) or the total listing of covered and not-covered (Both) for the search criteria entered. The default value is 'Both.'	Check Box	Radio Button	0
Drug Coverage Status Date	Allows the user to select search results that will display drugs currently covered (Today), or drugs covered on a previous date (Other Date). The entry box is not available unless "Other Date" is selected. If an invalid date is entered in the date field, it will default to the current date. The default value is the current date (Today).	Check Box	Radio Button	0
GCN Seq Number	The Generic Code Number Sequence Number of a drug that represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	9
Generic Name	Generic name of the relevant drug. Contains only the generic name of the drug(s) returned from the search criteria. This will be displayed if the 'Generic Name' radio button is selected.	Field	Character	63
Label Name	Label Name of the relevant drug. Contains name, strength, and dosage form of the drug(s) returned from the search criteria. This will be displayed if the 'Label Name' radio button is selected.	Field	Character	60
Lowest Price NDCBND	Lowest re-imbursable price of a drug which is priced using NDCBND pricing method.	Field	Number	7
Lowest Price NDCLOW	Lowest re-imbursable price of drug which is priced using NDCLOW pricing method.	Field	Number	7
Lowest Price Type NDCBND	Corresponding Lowest Price Type for NDCBND pricing method.	Field	Character	3

Field	Description	Field Type	Data Type	Length
Lowest Price Type NDCLOW	Corresponding Lowest Price Type for NDCLOW pricing method.	Field	Character	3
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Combo Box	Radio Button	0
Max Qty	The maximum quantity of the drug which can be dispensed.	Field	Number	10
NDC	The National Drug Code is a unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4-digit product code and a 2-digit package code.	Field	Character	11
PA	PA Indicator indicates whether PA is required (Y), Not required (N) or Blank.	Field	Character	1
PDL	PDL Indicator. Indicates the PDL status of the NDC, i.e. whether the drug or drug product is preferred (Y) or non-preferred (N) and blank when PDL indicator does not exists.	Field	Character	1
Records	Allows the user to specify the number of rows returned from the search.	Combo Box	Drop Down List Box	0
Search	Initiates 'Search' of 'Drug' records based on criteria keyed-in.	Button	N/A	0
Sounds-Like	Checking this box enables the user to use the sounds-like feature to search for drug descriptions.	Combo Box	Check Box	0
TC3	For FDB implementations: Therapeutic Class Code, Specific. For MDX implementations: Therapeutic Class Code, UMC lowest detail TC available in TC1 thru TC5.	Field	Character	3

Field	Description	Field Type	Data Type	Length
Type	Allows the user to specify whether to search on Label, Brand or Generic Name. The corresponding description is displayed in the search results. Note: If the search is done using the 'Brand Name' the search results column header will be 'Brand Name'. If the search is done by 'Label Name', then the search results column header will be 'Label Name'. If the search is done using the 'Generic Name' the search results column header will be 'Generic Name'.	Combo Box	Radio Button	0

6.14.4 Reference Drug Search Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Drug Coverage Status Date	Check Box	10	Future Dates are not allowed.	Enter any valid previous or current date.
	Check Box	30	As of date is not a valid date value.	Please enter a valid Drug Coverage Status Date.
	Check Box	1009	Date was invalid	Enter a valid date
Description by	Field	40	NDC, GCN Sequence Number, or Drug Description are required. Please enter a value for any of these.	Enter search values for either of these NDC, GCN Seq Number or Description By.
GCN Seq Number	Field	40	NDC, GCN Sequence Number, or Drug Description are required. Please enter a value for any of these.	Enter search values for either of these NDC, GCN Seq Number or Description By.
NDC	Field	20	NDC can only contain alphanumeric characters	Please enter an alphanumeric NDC code.
	Field	40	NDC, GCN Sequence Number, or Drug Description are required. Please enter a value for any of these.	Enter search values for either of these NDC, GCN Seq Number or Description By.

6.14.5 Reference Drug Search Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.14.6 Reference Drug Search Panel Accessibility

6.14.6.1 To Access the Reference Drug Search Panel

Step	Action	Response
1	Enter User Name and Password ; Click	Main Menu page displays.

Step	Action	Response
	Login.	
2	Point to Reference and click Drug .	Reference Drug Search panel displays.

6.15 Reference Drug Search Results Panel

6.15.1 Reference Drug Search Results Panel Narrative

The Reference Drug Search Results panel displays drug records that match the search criteria from the Drug search panel. This panel is display only.

Navigation Path: [Reference] – [Drug] - {Enter search criteria and click on 'search'}

6.15.2 Reference Drug Search Results Panel Layout

Search Results												
Drug	GCN Seq Number	Generic Name	Label Name	Covered	Max Qty	ALGI	PA	PDL	Lowest Price	Lowest Price Type	AHFS	TC3
66992023104	66024	PHENYLEPHRINE/BROMPHENIRAMINE ORAL 10MG-6MG/5 ORAL SUSP	VAZOBID SUSPENSION	No	240	2	N	XXXXXXXXXXXX	XXXX	04042000	Z2N	R - Replace
66992023004	61679	PHENYLEPHRINE/BROMPHENIRAMINE ORAL 10MG-6MG/5 ORAL SUSP	VAZOBID SUSPENSION	No	680	2	N	XXXXXXXXXXXX	XXXX	04042000	Z2N	U - Reuse
15014023004	66024	PHENYLEPHRINE/BROMPHENIRAMINE ORAL 10MG-6MG/5 ORAL SUSP	VAZOBID SUSPENSION	No	240	1		XXXXXXXXXXXX	XXXX	04042000	Z2N	

6.15.3 Reference Drug Search Results Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AHFS	Identifies the pharmacologic therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	10
AHFS	Identifies the pharmacologic therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	10
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 - Non-drug item 1 - Generic Product 2 - Brand Product	Field	Character	1
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 - Non-drug item 1 - Generic Product 2 - Brand Product	Field	Character	1
Brand Name	Brand name of the relevant drug. Contains only the brand name of the drug(s) returned from the search criteria. This is displayed if the 'Brand Name' radio button is selected.	Field	Character	30
Covered	Indicates the drug is covered (Yes) or not covered (No) on the request date. The results are in 'Covered' order.	Field	Character	1
Drug	Displays the National Drug Code of the drug.	Field	Character	11
GCN Seq Number	The Generic Code Number Sequence Number of a drug that represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	5

Field	Description	Field Type	Data Type	Length
Generic Name	Generic name of the relevant drug. Contains only the generic name of the drug(s) returned from the search criteria. This is displayed if the 'Generic Name' radio button is selected.	Field	Character	63
Label Name	Label Name of the relevant drug. Contains name, strength, and dosage form of the drug(s) returned from the search criteria. This is displayed if the 'Label Name' radio button is selected.	Field	Character	60
Max Qty	The maximum quantity of the drug which can be dispensed.	Field	Number	10
NDC Status	Displays the NDC Status for the Drug. Possible Values are R-Replace, U-Reuse, and Blank.	Field	character	13
PDL	PDL Indicator. Indicates the PDL status of the NDC, i.e. whether the drug or drug product is preferred (Y) or non-preferred (N). and blank when no PDL indicator exists.	Field	Character	1
TC3	Identifies the specific therapeutic class in which the active ingredient is classified.	Field	Character	3

6.15.4 Reference Drug Search Results Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.15.5 Reference Drug Search Results Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.15.6 Reference Drug Search Results Panel Accessibility

6.15.6.1 To Access the Reference Drug Search Results Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.

6.15.6.2 To Navigate the Reference Drug Search Results Panel

Step	Action	Response
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Step	Action	Response
1	Select row from list results.	Drug Information and Maintenance panels display.

6.14 Reference DRG Search and DRG Search Result-DRG Panel

6.14.1 Reference DRG Search and DRG Search Result-DRG Panel Narrative

The Reference DRG Search panel allows the user to search for a specific DRG code.

Only authorized users are allowed to perform maintenance tasks. The Reference DRG Search Results panel displays DRG Codes matching the search criteria from DRG search panel

Navigation Path: [Reference] – [DRG] - [search button] - (click on [search] button)

6.14.2 Reference DRG Search and DRG Search Result-DRG Panel Layout

The screenshot shows the 'Reference DRG Search' panel. It includes a 'DRG' field, a 'Description' field, a 'Match criteria' section with radio buttons for 'Begins With' (selected) and 'Contains', a 'Sounds-like' checkbox, a 'Records' dropdown set to 20, and buttons for 'search', 'clear', and 'add'. Below the panel is a 'Search Results' table with columns 'DRG' and 'Description'. The table contains 8 rows of results, starting with '494 LAPROSCOPIC CHOLECYSTECTOMY W/O CDE W/O CC' and followed by rows 495 through 502, each labeled as a test row added.

DRG	Description
494	LAPROSCOPIC CHOLECYSTECTOMY W/O CDE W/O CC
495	FIRST TEST ROW ADDED
496	SECOND TEST ROW ADDED
497	THIRD TEST ROW ADDED
498	Fourth Test Row
499	FIFTH TEST ROW ADDED
500	SIXTH TEST ROW ADDED
501	SEVENTH TEST ROW ADDED
502	EIGHT TEST ROW ADDED

Figure 6.14.2.1 DRG Search Panel and Search Results

6.14.3 Reference DRG Search and DRG Search Results - DRG Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
add	This button allows the user to create a new DRG record.	Button	N/A	0
clear	This clears all fields so the user may key-in new search criteria.	Button	N/A	0
Description	This field is used to describe a unique code to tag a specific Diagnosis Related Group (DRG).	Field	Character	132
DRG	This field is used to identify a unique code to tag a specific Diagnosis Related Group (DRG). They classify hospital cases into one of approximately 500 groups, also referred to as DRGs. DRGs are assigned by a "grouper" program based on ICD diagnoses, procedures, age, sex, and the presence of complications or comorbidities.	Field	Number (Integer)	4
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Combo Box	Radio Button	0
Records	Allows the user to specify the number of rows returned from the search.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
search	This initiates search for the DRG matching the code/description keyed-in.	Button	N/A	0
Sounds-like	Factor to retrieve records that partially match a given DRG Code and / or DRG Description.	Field	Check Box	0

6.14.4 Reference DRG Search-DRG Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found	Verify Keying. No records matching the description keyed-in were found.
DRG	Field	1	No rows found	Verify Keying. No records matching the code keyed-in were found.

6.14.5 Reference DRG Search-DRG Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.14.6 Reference DRG Search-DRG Panel Accessibility

6.14.7 To Access the Reference Search DRG and Search Results-DRG Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click DRG .	Reference DRG Search panel displays.
3	Click Search .	Reference DRG Search Results panel displays.
4	Select row from data list.	DRG Information and Maintenance panels display.

6.15 DRG Information-DRG Panel

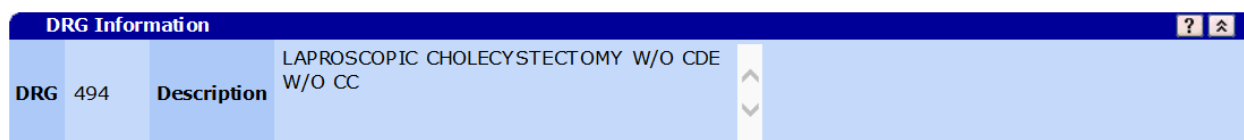
6.15.1 DRG Information-DRG Panel Narrative

The DRG Information panel is used to view DRG code data.

This panel is display only.

Navigation Path: [Reference] – [DRG] - [search] - [(select row from search results)] - [DRG Information]

6.15.2 DRG Information-DRG Panel Layout



6.15.3 DRG Information-DRG Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Text that describes the Diagnosis Related Group (DRG).	Field	Character	132
DRG	Code that uniquely identifies a Diagnosis Related Group (DRG). They classify hospital cases into one of approximately 500 groups, also referred to as DRGs. DRGs are assigned by a "grouper" program based on ICD diagnoses, procedures, age, sex, and the presence of complications or co morbidities.	Field	Number (Integer)	4

6.15.4 DRG Information-DRG Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.15.5 DRG Information-DRG Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.15.6 DRG Information-DRG Panel Accessibility

6.15.6.1 To Access the DRG Information-DRG Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click DRG .	Reference DRG Search panel displays.
3	Click Search .	Reference DRG Search Results panel displays.
4	Select row from data list.	DRG Information panel displays.

6.16 DRG Maintenance-DRG Panel

6.16.1 DRG Maintenance-DRG Panel Narrative

DRG Maintenance-DRG panel links to various DRG information maintenance panels.

This panel is inquiry only.

Navigation Path: [Reference] - [DRG (Search)] - (click on [search] button) - (select row from search results) - [DRG Maintenance] - [DRG]

6.16.2 DRG Maintenance-DRG Panel Layout

6.16.3 DRG Maintenance-DRG Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Base Information	Opens the Base Information panel.	Hyperlink	N/A	0
cancel	Cancels any changes being made on the DRG Maintenance panels.	Button	N/A	0
Group	Opens the Group panel.	Hyperlink	N/A	0
MDC	Opens the MDC List panel.	Hyperlink	N/A	0
new	Clicking the New button will clear all of the DRG panels for a new record.	Button	N/A	0
Rates	Opens the Rates panel.	Hyperlink	N/A	0
save	Saves any/all changes made to any/all panels under this navigation panel.	Button	N/A	0

6.16.4 DRG Maintenance-DRG Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.16.5 DRG Maintenance-DRG Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.16.6 DRG Maintenance-DRG Panel Accessibility

6.16.6.1 To Access the DRG Maintenance-DRG Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click DRG .	Reference DRG Search panel displays.
3	Click Search .	Reference DRG Search Results panel displays.
4	Select row from data list.	DRG Maintenance panel displays.

6.17 DRG Mini Search-DRG Panel

6.17.1 DRG Mini Search-DRG Panel Narrative

The DRG Mini-Search allows search by DRG Code from the DRG Information page.

This panel is inquiry only.

Navigation Path: [Reference]- [DRG] - [search] - [(select row from search results)] - [Next Search By]

6.17.2 DRG Mini Search-DRG Panel Layout

Next Search By:	DRG	<input type="text"/>	<input type="button" value="search"/>	<input type="button" value="clear"/>	<input type="button" value="adv search"/>
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6.17.3 DRG Mini Search-DRG Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
adv search	Returns the user to the main Reference DRG Search panel.	Button	N/A	0
clear	Clears the DRG field.	Button	N/A	0
DRG	This field is used to search for, and return the DRG Information panel for a specific Diagnosis Related Group (DRG) if found, or a list of any DRGs returned from the '%like%' search criteria.	Field	Character	4
search	Initiates search for a DRG record matching the 'DRG code' keyed-in DRG field.	Button	N/A	0

6.17.4 DRG Mini Search-DRG Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
DRG	Field	1	DRG Code does not exist	Enter a valid DRG code.
DRG	Field	2	DRG Code is required	Enter a DRG code.

6.17.5 DRG Mini Search-DRG Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.17.6 DRG Mini Search-DRG Panel Accessibility

6.17.6.1 To Access the DRG Mini Search-DRG Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click DRG .	Reference DRG Search panel displays.
3	Click Search .	Reference DRG Search Results panel displays.

Step	Action	Response
4	Select row from data list.	DRG Mini Search-DRG panel displays.

6.17.6.2 To Navigate the DRG Mini Search-DRG Panel

Step	Action	Response
1	Enter DRG .	
2	Click Search .	DRG Information and Maintenance panels display.

6.18 Base Information-DRG Panel

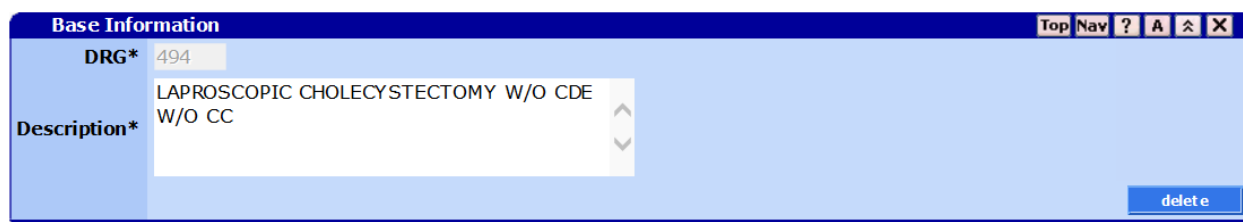
6.18.1 Base Information-DRG Panel Narrative

The DRG Code Base Information panel is used to update DRG code data.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [DRG] - [search] - [(select row from search results)] - [DRG Maintenance] - [Base Information]

6.18.2 Base Information-DRG Panel Layout



6.18.3 Base Information-DRG Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
delete	Allows the user to mark the currently open DRG record for deletion from Interchange.	Button	N/A	0
Description	This field is used to describe a unique code to tag a specific Diagnosis Related Group (DRG).	Field	Character	132
DRG	This field is used to identify a unique code to tag a specific Diagnosis Related Group (DRG). They classify hospital cases into one of approximately 500 groups, also referred to as DRGs. DRGs are assigned by a "grouper" program based on ICD diagnoses, procedures, age, sex, and the presence of complications or comorbidities.	Field	Character	4

6.18.4 Base Information-DRG Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	Description is required.	Enter a description.
DRG	Field	1	DRG is required.	Enter a valid DRG code.
	Field	2	DRG code is a duplicate code.	Verify keying. The DRG code keyed is already in the system.

6.18.5 Base Information-DRG Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.18.6 Base Information-DRG Panel Accessibility

6.18.6.1 To Access the Base Information-DRG Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click DRG .	Reference DRG Search panel displays.
3	Click Search .	Reference DRG Search Results panel displays.
4	Select row from data list.	DRG Information and Maintenance panels display.
5	Click Base Information .	Base Information-DRG panel displays.

6.18.6.2 To Add on the Base Information-DRG Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter DRG .	
3	Enter Description .	
4	Click Save .	Base Information-DRG information is saved.

6.18.6.3 To Update on the Base Information-DRG Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information-DRG information is saved.

6.18.6.4 To Delete on the Base Information-DRG Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.19 Drug Maintenance Panel

6.19.1 Drug Maintenance Panel Narrative

Links to the drug information maintenance panels.

This panel is inquiry only.

Navigation Path: [Reference] - [Drug] - (click on [search] and select row from search results)

6.19.2 Drug Maintenance Panel Layout

The screenshots show the Drug Maintenance Panel layout. The top panel has a header 'Drug Maintenance' and a sub-header 'Select drug area to add or modify below.' It lists various links: AAC Rate, AWP Rate, Benefit Plan Coverage Rules, Contract Billing Rules, Drug Group, Federal MAC Rate, Associated Audits, Base Information, CMS-FDB Information, DESI, Drug Rejection Criteria, and Generic Drug. The bottom panel has the same header and sub-header, but lists different links: HCPCS Procedure, Labeler Rebate Status, Note, PDL History, Pricing, Restrictions Maintenance, Ingredients, MME, Other Rates, Price Update Indicators, Reimbursement Rules, and State MAC Rate. Both panels include 'save' and 'cancel' buttons at the bottom left and navigation controls at the top right.

6.19.3 Drug Maintenance Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AAC Rate	Provides a link which opens the Average Acquisition Cost (AAC) Rate panel.	N/A	0	N/A
Associated Audits	Provides a link which opens the Associated Audits panels.	N/A	0	N/A
AWP Rate	Provides a link which opens the Average Wholesale Price panel.	N/A	0	N/A
Base Information	Provides a link which opens the Base Information panel.	N/A	0	N/A
Benefit Plan Coverage Rules	Provides a link which opens the Benefit Plan Coverage Rules panel.	N/A	0	N/A
Cancel	Allows the user to cancel an action.	Button	N/A	0
Contract Billing Rules	Provides a link which opens the Contract Billing Rules panel.	N/A	0	N/A
DESI	Provides a link which opens the Drug Efficacy Study Implementation panel.	N/A	0	N/A

Field	Description	Field Type	Data Type	Length
Drug Group	Provides a link which opens the Drug Group panel.	N/A	0	N/A
Drug Rejection Criteria	Provides a link which opens the Drug Rejection Criteria panel.	N/A	0	N/A
Federal MAC Rate	Provides a link which opens the Federal Maximum Allowable Cost panel.	Hyperlink	N/A	0
Generic Drug	Provides a link to the Generic Drug panel.	Hyperlink	N/A	0
HCPCS Procedure	Provides a link which opens the HCPCS Procedure - Drug panel.	Hyperlink	N/A	0
Ingredients	Provides a link to the Ingredients panel.	Hyperlink	N/A	0
Labeler Rebate Status	Provides a link which opens the Labeler Rebate Status panel.	Hyperlink	N/A	0
MME	Provides a link which opens the MME panel.	Hyperlink	N/A	0
Note	Provides a link which opens the Note panel.	Hyperlink	N/A	0
Other Rate	Provides a link which opens the Other Rate panel.	Hyperlink	N/A	0
PDL History	Provides a link which opens the PDL History panel.	Hyperlink	N/A	0
Price Update Indicators	Provides a link which opens the Price Update Indicators panel.	Hyperlink	N/A	0
Pricing	Provides a link which opens the Pricing panel.	Hyperlink	N/A	0
Reimbursement Rules	Provides a link which opens the Reimbursement Rules panel.	Hyperlink	N/A	0
Restrictions Maintenance	Provides a link which opens the Restrictions Maintenance panel.	Hyperlink	N/A	0
Save	Allows the user to save any changes made on the panel.	Button	N/A	0
State MAC Rate	Provides a link which opens the State Maximum Allowable Cost panel.	Hyperlink	N/A	0

6.19.4 Drug Maintenance Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.19.5 Drug Maintenance Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.19.6 Drug Maintenance Panel Accessibility

6.19.6.1 To Access the Drug Maintenance Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance panel displays.

6.19.6.2 To Navigate on the Drug Maintenance Panel

Step	Action	Response
1	Click on hyperlink to select an area to add or modify.	Selected panel displays.

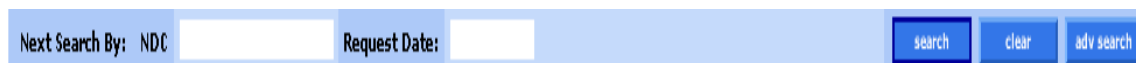
6.20 Drug Mini Search-Drug Panel

6.20.1 Drug Mini Search-Drug Panel Narrative

The Drug Mini Search panel provides the user with the ability to search for a Drug from the Drug Information page. This panel is inquiry only.

Navigation Path: [Reference] – [Drug] - (click on [search] and select row from search results)

6.20.2 Drug Mini Search-Drug Panel Layout



6.20.3 Drug Mini Search-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	This takes the user to Drug main search page where user can set more advanced search criteria.	Button	N/A	0
Clear	This 'clears' the 'Drug' field so user may key-in a new criterion.	Button	N/A	0
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4-digit product code, and a 2-digit package code.	Field	Character	11
Request Date	Allows the user to enter a specific, previous date, to inquire about drug coverage for a particular NDC. If left blank, Request Date will default to the current date	Field	Date(MMDDCCYY)	8
Search	This initiates 'search' of Drug database to find a record matching the NDC Code keyed-in.	Button	N/A	0

6.20.4 Drug Mini Search-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.20.5 Drug Mini Search-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.20.6 Drug Mini Search-Drug Panel Accessibility

6.20.6.1 To Access the Drug Mini Search-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Mini Search panel displays.

6.20.6.2 To Navigate on the Drug Mini Search-Drug Panel

Step	Action	Response
1	Enter NDC .	
2	Click Search .	Drug Information and Maintenance panels display.

6.21 Reference Drug Information Panel

6.21.1 Reference Drug Information Panel Narrative

The Drug Information panel provides an 'inquiry only' view of base drug data such as NDC (National Drug Code) and Brand Name.

First DataBank (FDB), a leading provider of electronic drug information, supplies EDS with comprehensive descriptive, pricing and clinical information on drugs.

Navigation Path: [Reference - Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - Drug Information

6.21.2 Reference Drug Information Panel Layout

Drug Information			
NDC		Manufacturer	
NDC	38396041657	Labeler ID	D38396
Covered on 11/30/2018	No	Manufacturer/Distributor	PERRIGO DIABETE
PA		Innovator	0 - No
Brand Name	ULTRA COMFORT	IPI	0 - Not Institutional
Label Name	DRUG MART ULTRA COMFORT SYR		
NDC Format	4 - UPC 5-5	Package	
Previous NDC		Drug Form	EA - tablets,kits,etc.
Replaced by NDC		Package	Box
NDDF Add	07/17/2008	Standard Package	0 - No
Last NDDF Update	04/09/2012	Package Size	100.000
Last AWP Update	07/17/2008	Shelf Pack	1
Obsolete Date		Shipper Quantity	1
NDC status		Case Size	1
Update Indicator	Y - Yes	Unit Dose	0 - No
Status	A - Active	Unit of Use	0 - No
Source	1 - Multiple	Repack	0 - Not Repackaged
Class	0 - Over the Counter		
GPI	9 - Indicator no longer valid	Drug Selection	
NDA		DEA	0 - No control
ANDA		Schedule Code	OC
GNI	0 - Non-Drug item		
ALGI	1 - Generic Product	CMS	
Maintenance Drug	1 - Yes	Unit	
Top Volume Ranking	0	CMS Package Size	0.000
Generic Drug		Approval Date	
GCN Seq No	49358	Market Entry Date	
Generic Name	SYRINGE & NEEDLE,INSULIN,1 ML MISCELL 30GX5/16" DISP SYRIN	Termination Date	
HICL Seq No	23038	Category	
Ingredient List	X2BJJF	Orange Book Evaluation	
HIC4	X2BJ SYRINGE W-NDL, DISP., INSULIN	OBC3	ZB
Drug Category Code	R-DISP,SYRINGES W/WO NEEDLES (INSULIN)		PARTICULAR PHARMA CEUT ICAL ENTITY
Therapeutic Class			
Generic	74 MISCELLANEOUS MEDICAL SUPPLIES, DEVICES,		
Standard	00 MEDICAL SUPPLIES		
Specific	X2B SYRINGES AND ACCESSORIES		
AHFS	94000000 DEVICES		
Therapeutic Equivalency			

6.21.3 Reference Drug Information Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AHFS (Code)	Identifies the pharmacological therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	6
AHFS (Description)	Text description of the American Hospital Formulary Service (AHFS) classification.	Field	Character	40
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 – Non-drug item 1 – Generic Product 2 – Brand Product.	Field	Character	1
Approval Date	Date the FDA approves a product for sale in the marketplace. This data is supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is supplied to CMS by the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8
Brand Name	Name that appears on the package label provided by the manufacturer.	Field	Character	35

Field	Description	Field Type	Data Type	Length
CMS Package Size	Indicates the number of units per package as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. This column must be used in conjunction with the HCFA Unit Type to determine the appropriate number of units. Format is 99999999.999. Note: Data received from FDB and CMS. Will source from FDB update only if the package size on file is 0. Updates to this data element from the CMS quarterly update will always be applied.	Field	Number (Decimal)	11
Case Size	Number of usable units in the shipping container. First DataBank uses this number as a divisor to calculate the single package price when case pricing for the NDC is reported to First DataBank; customers can use it as a multiplier to determine the case price from the single package price. When case pricing for the NDC is not reported, the default is 1.	Field	Number (Decimal)	9
Category	Identifies single source, multi-source, or innovator status as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The data is supplied to CMS by the drug labeler.	Field	Character	1
Class	Classifies a drug by its availability to the consumer according to federal specifications. e.g. Over the counter (O) or Legend (F).	Field	Character	1
Covered On	Displays the request date and coverage status of the NDC displayed on the panel. Valid values are 'Yes,' and 'No.'	Field	Character	1

Field	Description	Field Type	Data Type	Length
DEA	Drug Enforcement Administration (DEA) Code. Denotes the degree of potential abuse and federal control of a drug. This code is subject to change by federal regulation.	Field	Character	1
Drug Category Code	The Drug Category Code indicates that a drug product belongs to a category that is commonly treated as an exception in third party plans.	Field	Character	100
Drug Form	Indicates the type of billing unit to be used for a product. E.G. Each (tablets, kits, etc.).	Field	Character	2
GCN Seq Number	Clinical Formulation ID. Represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	9
GNI	Generic Name Indicator (GNI). Specifies whether a product is a brand named product, a generically named product, or an alternative product, using the product name as the criteria.	Field	Character	1
GPI	Generic Price Indicator (GPI). Distinguishes a product as either generically priced or priced as a brand.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Generic (Code)	Generic Therapeutic Class (GTC) code. Classifies drugs according to the most common intended use. This classification provides the most general therapeutic groupings available from First DataBank. Users that need more definitive therapeutic classing should consider Standard Therapeutic Class (for example).	Field	Number (Integer)	2
Generic (Description)	Text description of the Generic Therapeutic Class.	Field	Character	40
Generic Name	Combination of active ingredient names, route of administration, dosage form, and strength.	Field	Character	63
HIC4 (Code)	Hierarchical Ingredient Code of the primary ingredient.	Field	Character	4
HIC4 (Description)	Text description of the HIC4 Code.	Field	Character	40
HICL Sequence Number	Ingredient List Identifier. A permanent numeric identifier that identifies a unique combination of active ingredients, irrespective of the manufacturer, package size, dosage form, route of administration, or strength.	Field	Number (Integer)	6
IPI	Identifies products sold only to selected customers, usually at a discounted price. Institutional products are manufacturer-specified; customers must meet the manufacturer's definition of an institution (for example, nursing homes, the Veteran's Administration). 0 - Not Institutional.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Ingredients	Ingredient list (commonly referred to as the HICL or HIC List), referenced by the HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.	Listview	N/A	0
Ingredient List	Ingredient list (commonly referred to as the HICL or HIC List), referenced by the HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.	Field	Character	62
Innovator	This field identifies the original innovator product for a particular generic code number. Values are: '0 - No' = non-innovator drug, and '1 - Yes' = Innovator held original patent. It is possible to have more than one product to appear to be the innovator.	Field	Character	1
Label Name	Combination of the drug name appearing on the package label, the strength description, and the dosage form description for a specified product.	Field	Character	40

Field	Description	Field Type	Data Type	Length
Labeler ID	Code that represents the product labeler (a manufacturer, distributor, or repackager). The first character is alphabetic and represents a division within a company. The last five characters are numeric and represent the parent company. Not be confused with the five-digit labeler code that is assigned to a company by the FDA and that comprises the first five digits of an NDC.	Field	Number (Integer)	9
Last AWP Update	Date the AWP (Average Wholesale Price) was last changed according to the NDDF (National Drug Data File).	Field	Date (MM/DD/CCYY)	8
Last NDDF Update	Date on which the drug information was last changed on the NDDF from FDB.	Field	Date (MM/DD/CCYY)	8
Maintenance Drug	Identifies a drug as a maintenance drug.	Field	Character	1
Manufacturer/Distributor	Name of the product labeler (a manufacturer, distributor, or repackager).	Field	Character	15
Market Entry Date	Date a manufacturer releases the drug product to the marketplace. This data is supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is provided to CMS by the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4-digit product code and a 2-digit package code.	Field	Character	11
NDC Format	Defines both the type of external identifying code (NDC, HRI, UPC, or PIN) in the NDC field and the way in which this code has been converted into the 11-digit 5-4-2 format.	Field	Character	9
NDC Status	Displays the NDC Status for the Drug. Possible Values are R-Replace, U-Reuse and Blank	Field	Character	1
NDDF Add	Date on which the drug record was added to the National Drug Data File (NDDF) from FDB.	Field	Date (MM/DD/CCYY)	8
OBC3 (Code)	Orange Book Code; 3-Byte Version (OBC3). Identifies the equivalency ratings assigned to approved prescription products according to the FDA's Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book). When there is not a three-byte code in the Orange Book, the default OBC3 is the two-byte OBC plus a trailing blank.	Field	Character	3
OBC3 (Description)	Text description of the 3-Byte Orange Book Code (OBC3).	Field	Character	30
Obsolete Date	Date when the drug product is no longer available on the market place as per the manufacturer's notification, or the best estimate of that date.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
PA	PA Indicator. Indicates whether PA is required Yes, No or Blank.	Field	Character	3
Package	Description of the container that is in direct contact with the product. First DataBank obtains the Package Description from the product package insert and abbreviates to keep package description terms within 10 characters.	Field	Character	10
Package Size	Metric quantity used to derive a unit price. The usual labeled quantity from which the pharmacist dispenses, such as 100 tablets, 1000 capsules, 20 ml vial, etc. Format is 99999999.999.	Field	Number (Decimal)	11
Previous NDC	Previous/Old NDC if the current NDC is a replacement NDC.	Field	Number (Integer)	11
Repack	Identifies a product as repackaged or not repackaged. 0 - Not repackaged 1 – Repackaged.	Field	Character	1
Replaced by NDC	Replacement/New NDC if the current NDC has been changed or replaced by the labeler. An NDC must be obsolete in order for a replacement to be assigned, and the Brand Name (BN), formulation, and package size must be the same for the old and new NDC.	Field	Number (Integer)	11
Schedule Code	The unique two character code for the description of the Alabama Schedule.	Field	Character	2
Shelf Pack	Number of bundled salable units in the shipping container.	Field	Number (Integer)	9
Shipper Quantity	Number of salable units in the minimum order quantity available from the distributor; it is usually a multiple of the Shelf Pack or Case Pack.	Field	Number (Integer)	9

Field	Description	Field Type	Data Type	Length
Source	NDC-level single-source or multi-source indicator. Specifies whether a product's generic formulation (i.e. its particular active ingredient, dosage form, route of administration and strength) is only available from a single distributor or from multiple distributors.	Field	Character	1
Specific (Code)	Hierarchical Specific Therapeutic Class Code (HIC3). Identifies the specific therapeutic class in which the active ingredient is classified.	Field	Character	3
Specific (Description)	Text description of the Specific Therapeutic Class.	Field	Character	40
Standard (Code)	Standard Therapeutic Class (TC) Code. Classifies drugs according to the most common intended use. This therapeutic classification is intended to service those users who need a definitive but not comprehensive therapeutic classification system. A more comprehensive therapeutic classification is provided by Specific Therapeutic Class (for example).	Field	Number (Integer)	2
Standard (Description)	Text Description of the Standard Therapeutic Class.	Field	Character	40
Standard Package	Indicates whether the product package size is the standard package size.	Field	Character	1
Status	Identifies the status of a drug within interChange. A drug is marked as either Active (A) or Inactive (I). This information is used to allow the user to review additions and updates to a drug before it is activated for use by interChange.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Termination Date	Shelf-life expiration date of the last batch of product produced, as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is supplied to CMS from the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8
Therapeutic Equivalency (Code)	CMS FDA Therapeutic Equivalency Code. Provided from CMS's quarterly tape and is a 2 character code, as indicated by the U.S. Food and Drug's Administration's (FDA) rating of the therapeutic equivalence of a product within other pharmaceutically equivalent drug products, as published.	Field	Character	2
Therapeutic Equivalency (Description)	Text description of the CMS FDA Therapeutic Equivalency Code. Provided from CMS's quarterly tape and is a 2 character code, as indicated by the U.S. Food and Drug's Administration's (FDA) rating of the therapeutic equivalence of a product within other pharmaceutically equivalent drug products, as published.	Field	Character	100
Top Volume Ranking	Indicates if a drug is included in the list of the most frequently dispensed 200 drug products. Different package sizes and dose forms of the same drug have the same number. This field is based on pharmaceutical market research surveys and originates from First DataBank.	Field	Number (Integer)	4

Field	Description	Field Type	Data Type	Length
Unit	Indicates the unit of measure as supplied on the Health Care Financing Administration's quarterly tape. Note: Data received from FDB and CMS. Will source from FDB update only if the CMS unit file is blank. Updates from the CMS quarterly update will always be applied.	Field	Character	3
Unit Dose	Marks a drug as packaged in unit doses. Unit dose is defined by FDB as all products labeled as Unit Dose by the manufacturer. This indicator does not apply to injectable products, suppositories, or powder packets. Products labeled as Unit Dose are not sold as individual unit doses; rather, the product is sold in a package that contains several Unit Doses.	Field	Character	1
Unit of Use	Identifies products that are packaged per course of therapy. Products are labeled as Unit of Use by the manufacturer. These products are supplied with appropriate labeling and (usually) child resistant closures, and thus are appropriate to dispense as a unit.	Field	Character	1
Update Indicator	Indicates whether batch update to the NDC should be allowed.	Field	Character	1

6.21.4 Reference Drug Information Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this window.				

6.21.5 Reference Drug Information Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.21.6 Reference Drug Information Panel Accessibility

6.21.6.1 To Access Reference Drug Information Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information panel displays.

6.22 AAC Rate-Drug Panel

6.22.1 AAC Rate-Drug Panel Narrative

The Average Acquisition Cost (AAC) Rate panel is used to maintain the AAC Rate type at GSN level.

Only users with update authority are allowed to modify this panel.

Navigation Path: [Reference] - [Drug Search] - [(Add button) OR (Search and select row from search results)] - [Drug Maintenance] - [AAC Rate]

6.22.2 AAC Rate-Drug Panel Layout

The screenshot shows the 'AAC Rate' panel. At the top, it says 'These rates are maintained by GSN'. Below this is a table with columns: Price, Status, Price Type, Effective Date, End Date, and Update. The table contains four rows of data. Below the table is a form with fields for Price, Status, Price Type, Effective Date, End Date, and Update. There are 'delete' and 'add' buttons at the bottom right.

Price	Status	Price Type	Effective Date	End Date	Update
\$111.00000	Active	B - Brand	01/01/2001	01/01/2002	Yes
\$23.00000	Active	B - Brand	02/02/2002	02/03/2002	Yes
\$2.00000	Active	G - Generic	01/01/2001	01/01/2002	Yes
\$9.00000	Inactive	G - Generic	05/05/2005	11/30/2299	No

Select row above to update -or- click Add button below.

Price: Effective Date:
Status: End Date:
Price Type: Update:

delete add

6.22.3 AAC Rate-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add an AAC pricing record to all drugs under the same GSN.	Button	N/A	0
Delete	Allows the user to delete an AAC pricing record from all drugs under the same GSN.	Button	N/A	0
Status	Indicates whether the AAC pricing segment is in an active (Y) or inactive (N) status. Only active segments will be used for pricing. Inactive segments will be maintained for historical purposes.	Combo Box	Character	1
Effective Date	This is the date that the drug's Average Acquisition Cost takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	This is the date that the drug's Average Acquisition Cost is no longer in effect.	Field	Date (MM/DD/CCYY)	8
Price	This is the Average Acquisition Cost for all drugs within a GSN as determined by contractor Myers & Stauffer	Field	Number	12
Price Type	Indicates if the corresponding price is for Brand or Generic drugs within	Combo Box	Character	1

Field	Description	Field Type	Data Type	Length
	the same GSN. Valid values are: B – Brand and G – Generic.			
Update	Indicates whether batch updates to the AAC Rate file should be allowed. N = Batch updates not allowed. Y = Batch updates allowed.	Combo Box	Character	1

6.22.4 AAC Rate-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Add	Button	1	The update failed because the data has been changed since it was loaded. Please reload the data, and apply your changes again.	Reload the data for AAC Rate panel.
Effective Date	Field	1	Effective Date must be less than or equal to the End Date.	Enter an Effective Date that is less than or equal to the End Date.
	Field	2	Invalid date. Format is MM/DD/CCYY.	Enter an Effective Date in mm/DD/CCYY format.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	4	Effective Date is required.	Enter an Effective Date.
	Field	5	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Invalid Date. Format is MM/DD/CCYY.	Enter a valid End Date in mm/DD/CCYY format.
	Field	2	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than 01/01/1900.
	Field	3	End Date is required.	Enter an End Date.
	Field	4	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Price	Field	1	Price is required.	Enter Price.
	Field	2	Enter a valid value.	Enter valid price(less than or equal to 9999999.99999).
	Field	3	Price must be greater than or equal to 0000.00000.	Enter valid amount in the field.

Field	Field Type	Error Code	Error Message	To Correct
Price Type	Combo Box	1	Price Type is required.	Enter Price Type.
Status	Combo Box	1	Status is required.	Enter Status.
Update	Combo Box	1	Update is required.	Enter Update.

6.22.5 AAC Rate-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.22.6 AAC Rate-Drug Panel Accessibility

6.22.6.1 To Access the AAC Rate-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click AAC Rate .	AAC Rate-Drug panel displays.

6.22.6.2 To Add on the AAC Rate-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Price and PriceType .	
3	Select Status and Update from drop down list box.	
4	Enter Effective Date in MM/DD/CCYY format.	
5	Enter End Date in MM/DD/CCYY format.	
6	Click Save .	AAC Rate-Drug information is saved.

6.22.6.3 To Update on the AAC Rate-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	AAC Rate-Drug information is saved.

6.22.6.4 To Delete on the AAC Rate-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.23 Drug – MME Panel

6.23.1 Drug - MME Panel Narrative

The Drug MMC Maintenance panel is used to display MME information linked to the drug.

This panel is display only.

Navigation Path: [Reference] - [Drug Search] - [(Add button) OR (Search and select row from search results)] - [Drug Maintenance] - [MME]

6.23.2 Drug – MME Panel Layout

MME			Top	Nav	?	⌵	✕
Active	Morphine Equivalent	Long Acting					
Yes	0.30	No					

6.23.3 Drug - MME Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Active	MME Factor Available. For multi-ingredient products containing more than one opioid, this indicator will only be Yes.	Field	Character	1
Long Acting	Long Acting Opioid Indicator, product is considered to be a long acting opioid.	Field	Character	1
Morphine Equivalent	MME Strength Per Dosage Unit provides a total MME per dosage form. If the Clinical Formulation contains an ingredient with two different salts then results in this field is a sum of both.	Field	Number (Decimal)	34

6.23.4 Drug - MME Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.23.5 Drug - MME Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.23.6 Drug - MME Panel Accessibility

6.23.6.1 To Access the Drug - MME Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click MME .	MME panel displays.

6.24 Associated Audits-GCN Sequence Number-Drug Panel

6.24.1 Associated Audits-GCN Sequence Number-Drug Panel Narrative

The Associated Audits - GCN Sequence Number panel displays a list of all table driven audits associated to a specific NDC code by GCN Sequence Number.

This panel is display only.

Navigation Path: [Reference] – [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Associated Audits]

6.24.2 Associated Audits-GCN Sequence Number-Drug Panel Layout

Associated Audits - GCN Sequence Number						Top	Nav	?	A	↑	×
Audit Number	Audit Type	Description	PA Indicator	Effective Date	End Date						
6550	LIMIT	PRESCRIPTION LIMIT EXCEEDED	N	01/01/1990	12/31/2299						
6554	LIMIT	WAIVER ADDITIONAL 2 SCRIPT HAS BEEN REACHED	N	10/01/2002	12/31/2299						

6.24.3 Associated Audits-GCN Sequence Number-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Audit Number	Code that uniquely identifies an audit.	Field	Character	4
Audit Type	Identifies the audit as limitation, contra-indicated, umbrella, etc.	Field	Character	16
Description	Text describing the audit.	Field	Character	50
Effective Date	First date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
End Date	Last date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
PA Indicator	Indicates whether prior authorization is required. Valid values include: Y = Yes N = No	Field	Character	1

6.24.4 Associated Audits-GCN Sequence Number-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.24.5 Associated Audits-GCN Sequence Number-Drug Panel Extra Features

The "Associated Audit" link opens three panels:

Associated Audits - Standard Therapeutic Class

Associated Audits - NDC

Associated Audits - GCN Sequence Number

6.24.6 Associated Audits-GCN Sequence Number-Drug Panel Accessibility

6.24.6.1 To Access the Associated Audits-GCN Sequence Number-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click Associated Audits .	Associated Audits –GCN Sequence Number panel displays.

6.25 Associated Audits-NDC-Drug Panel

6.25.1 Associated Audits-NDC-Drug Panel Narrative

The Associated Audits panel displays an 'inquiry only' listing of all table driven audits associated to a specific NDC code. This panel is display only.

Navigation Path: [Reference] - [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Associated Audits]

6.25.2 Associated Audits-NDC-Drug Panel Layout

Associated Audits - NDC						Top	Nav	?	A	↑	×
Audit Number	Audit Type	Description	PA Indicator	Effective Date	End Date						
6550	LIMIT	PRESCRIPTION LIMIT EXCEEDED	N	01/01/1990	12/31/2299						
6554	LIMIT	WAIVER ADDITIONAL 2 SCRIPT HAS BEEN REACHED	N	10/01/2002	12/31/2299						

6.25.3 Associated Audits-NDC-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Audit Number	Code that uniquely identifies an audit.	Field	Character	4
Audit Type	Identifies the audit as limitation, contra-indicated, umbrella, etc.	Field	Character	16
Description	Text describing the audit.	Field	Character	50
Effective Date	First date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
End Date	Last date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
PA Indicator	Indicates whether prior authorization is required.. Valid values include: Y = Yes N = No	Field	Character	1

6.25.4 Associated Audits-NDC-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.25.5 Associated Audits-NDC-Drug Panel Extra Features

The "Associated Audit" link opens three panels:

Associated Audits - Standard Therapeutic Class

Associated Audits - NDC

Associated Audits - GCN Sequence Number

6.25.6 Associated Audits-NDC-Drug Panel Accessibility

6.25.6.1 To Access the Associated Audits-NDC Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click Associated Audits .	Associated Audits-NDC Drug panel displays.

6.26 Associated Audits-Standard Therapeutic Class-Drug Panel

6.26.1 Associated Audits-Standard Therapeutic Class-Drug Panel Narrative

The Associated Audits - Standard Therapeutic Class panel displays a list of all table driven audits associated to a specific NDC code.

This panel is display only.

Navigation Path: [Reference - Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Associated Audits]

6.26.2 Associated Audits-Standard Therapeutic Class-Drug Panel Layout

Associated Audits - Standard Therapeutic Class						Top	Nav	?	A	⌵	X
Audit Number	Audit Type	Description	PA Indicator	Effective Date	End Date						
6550	LIMIT	PRESCRIPTION LIMIT EXCEEDED	N	01/01/1990	12/31/2299						
6554	LIMIT	WAIVER ADDITIONAL 2 SCRIPT HAS BEEN REACHED	N	10/01/2002	12/31/2299						

6.26.3 Associated Audits-Standard Therapeutic Class-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Audit Number	Code that uniquely identifies an audit.	Field	Character	4
Audit Type	Identifies the audit as limitation, contra-indicated, umbrella, etc.	Field	Character	16
Description	Text describing the audit.	Field	Character	50
Effective Date	First date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
End Date	Last date the audit is effective within interChange.	Field	Date (MM/DD/CCYY)	8
PA Indicator	Indicates whether prior authorization is required. Valid values include: Y = Yes N = No	Field	Character	1

6.26.4 Associated Audits-Standard Therapeutic Class-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.26.5 Associated Audits-Standard Therapeutic Class-Drug Panel Extra Features

The "Associated Audit" link opens three panels:

Associated Audits - Standard Therapeutic Class

Associated Audits - NDC

Associated Audits - GCN Sequence Number

6.26.6 Associated Audits-Standard Therapeutic Class-Drug Panel Accessibility

6.26.6.1 To Access the Audits- Standard Therapeutic Class-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click Associated Audits .	Associated Audits-Standard Therapeutic Class panel displays.

6.27 AWP Rate-Drug Panel

6.27.1 AWP Rate-Drug Panel Narrative

The Drug AWP Maintenance panel is used to maintain the drug's Blue Book Average Wholesale unit Price (AWP). The AWP represents the most common wholesaler price to the retailer or hospital and is based on actual surveys of drug wholesalers. This information is maintained on a weekly basis from First DataBank drug tapes. Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug Search] - [(Add button) OR (Search and select row from search results)] - [Drug Maintenance] - [AWP Rate]

6.27.2 AWP Rate-Drug Panel Layout

The screenshot shows the 'AWP Rate' panel. At the top, there is a table with columns: AWP, Status, Effective Date, End Date, EAC Price, EAC Percent, EAC Percent Effective Date, and EAC Percent End Date. The first row shows 'A \$0.00 Active 01/01/1900 12/31/2299 \$0.00000 0.900 01/01/1900 12/31/2299'. Below the table, there is a form for adding a new record. The form includes fields for Average Wholesale Unit Price* (\$0.00), Status* (Active), Effective Date* (01/01/1900), End Date* (12/31/2299), EAC Price (\$0.00000), EAC Percent Effective Date (01/01/1900), EAC Percent (0.900), and EAC Percent End Date (12/31/2299). There are 'delete' and 'add' buttons at the bottom right.

6.27.3 AWP Rate-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add an AWP pricing record for this Drug.	Button	N/A	0
Average Wholesale Unit Price	Blue Book average wholesale unit price. It represents the most common wholesaler price to the retailer or hospital. This price is based on actual surveys of drug wholesalers. Format \$9,999,999.99999.	Field	Number (Decimal)	12
Delete	Allows the user to delete an AWP pricing record from this Drug.	Button	N/A	0
EAC Percent	Actual percentage value to be applied to the estimated acquisition cost to determine reimbursement amount. Format 100.0.	Field	Number (Decimal)	4
EAC Percent Effective Date	First date that the associated percentage is effective.	Field	Date (MM/DD/CCYY)	8
EAC Percent End Date	Last dispense date that this percentage is applicable.	Field	Date (MM/DD/CCYY)	8
EAC Price (computed)	Contains the price representing the Estimated Acquisition Cost. Format is \$9,999,999.99999. .	Field	Number (Decimal)	12

Field	Description	Field Type	Data Type	Length
	EAC Price = (AWUP * EAC Percent).			
Effective Date	Date the Average Wholesale Price and the Estimated Acquisition Cost took effect.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Average Wholesale Price and the Estimated Acquisition Cost is no longer in effect.	Field	Date (MM/DD/CCYY)	8
Status	Indicates whether the status of AWP pricing segment is active or inactive.	Combo Box	Drop Down List Box	0

6.27.4 AWP Rate-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Average Wholesale Unit Price	Field	1	AWP Amount must be greater than or equal to 0000.00001.	Enter valid amount in the field.
	Field	2	AWP Amount must be less than or equal to \$9,999,999.99999.	Enter valid amount in the field.
	Field	3	Average Wholesale Unit Price is required.	Enter a valid AWUP.
Effective Date	Field	1	Effective Date must be less than or equal to the End Date.	Enter an Effective Date that is less than or equal to the End Date.
	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Correct overlap condition. Date segments cannot overlap.
	Field	3	Invalid date.	Enter an Effective Date in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	5	Effective Date is required.	Enter an Effective Date.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.

Field	Field Type	Error Code	Error Message	To Correct
End Date	Field	1	Invalid Date.	Enter a valid End Date in MM/DD/CCYY format.
	Field	2	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than 01/01/1900.
	Field	3	End Date is required.	Enter an End Date.
	Field	4	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.

6.27.5 AWP Rate-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.27.6 AWP Rate-Drug Panel Accessibility

6.27.6.1 To Access the AWP Rate-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Information and Maintenance panels display.
6	Click AWP Rate .	AWP Rate-Drug panel displays.

6.27.6.2 To Add on the AWP Rate-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Average Wholesale Unit price .	
3	Select Status from drop down list box.	
4	Enter Effective Date in MM/DD/CCYY format.	
5	Enter End Date in MM/DD/CCYY format.	
6	Click Save .	AWP Rate-Drug information is saved.

6.27.6.3 To Update on the AWP Rate-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	AWP Rate-Drug information is saved.

6.27.6.4 To Delete on the AWP Rate-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.28 Base Information-Drug Panel

6.28.1 Base Information-Drug Panel Narrative

The Drug Base Information panel is used to maintain base drug (NDC) data. Update privileges are controlled via Security Roles. Only users with authorized access are allowed to perform maintenance tasks.

First DataBank (FDB), a leading provider of electronic drug information, supplies EDS with comprehensive descriptive, pricing and clinical information on drugs.

NDC Note:

The NDC field contains NDCs, HRIs, UPCs, and PINs-the external identifiers representing drugs and health-related products. NDC codes are 11 digits for Alabama Medicaid purposes. NDCs, HRIs, and UPCs are ten-digit codes; a zero has been added to make them 11-digit codes, in accordance with NCPDP standards. PINs are already 11-digits. First DataBank refers to all external identifiers (NDC, HRI, UPC, and PIN) as NDCs. The NDC Format Indicator is used to determine if the value is an NDC, HRI, UPC, or PIN.

Navigation Path: [Reference] – [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Base Information]

6.28.2 Base Information-Drug Panel Layout

Base Information		Top Nav ? A Z X	
NDC		Manufacturer	
NDC	66992023104	Labeler ID	A66992 [Search]
Covered on 5/11/2018	No	Manufacturer/Distributor	WRASER PHARMA
Brand Name	VAZOBID	Innovator	0 - No
Label Name*	VAZOBID SUSPENSION	IPI	0 - Not Institutional
NDC Format	2 - NDC 5-3-2	Package	
Previous NDC	[Search]	Drug Form	ML - liquids
Replaced by NDC	[Search]	Package	Can
NDDF Add	04/19/2010	Standard Package	0 - No
Last NDDF Update	09/28/2011	Package Size	118.000
Last AWP Update	04/19/2010	Shelf Pack	1
Obsolete Date	04/04/2011	Shipper Quantity	1
NDC status	R - Replace	Case Size	1
Update Indicator*	Y - Yes	Unit Dose	0 - No
Status	A - Active	Unit of Use	0 - No
Source	1 - Multiple	Repack	0 - Not Repackaged
Class	F - Federal Legend	Drug Selection	
GPI	9 - Indicator or no longer valid	DEA	0 - No control
NDA		Schedule Code	RX
ANDA		CMS	
GNI*	2 - Brand Named or Single-Source	Unit	
ALGI	2 - Brand Product	CMS Package Size	0.000
Maintenance Drug	- No	Approval Date	
Top Volume Ranking	0	Market Entry Date	
Generic Drug		Termination Date	
GCN Seq No	66024	Category	- Unspecified
Generic Name	PHENYLEPHRINE/BROMPHENIRAMINE ORAL 10MG-6MG/5 ORAL SUSP	Orange Book Evaluation	
HICL Seq No	443	OBC3	ZB
Ingredient List	J5EHHCZ2ANMA	PARTICULAR PHARMACEUTICAL ENTITY	
HIC4	J5EH PHENYLEPHRINE		
Drug Category Code	0- UNSPECIFIED		
Therapeutic Class			
Generic	18 ANTIHISTAMINE AND DECONGESTANT COMBINATION		
Standard	99 MISCELLANEOUS		
Specific	Z2N 1ST GEN ANTIHISTAMINE & DECONGESTANT COMBINAT		
AHFS	04042000 [Search]		
Therapeutic Equivalency	PROPYLAMINE DERIVATIVES		
-- Ingredients --			
Sequence Number	HIC	Description	
1	J5EHHC	PHENYLEPHRINE HCL	
2	Z2ANMA	BROMPHENIRAMINE MALEATE	

6.28.3 Base Information-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AHFS (Code)	Identifies the pharmacological therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	10

Field	Description	Field Type	Data Type	Length
AHFS (Description)	Text description of the American Hospital Formulary Service (AHFS) classification.	Field	Character	40
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 – Non-drug item 1 – Generic Product 2 – Brand Product.	Field	Character	1
Approval Date	Date the FDA approves a product for sale in the marketplace. This data is supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is supplied to CMS by the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8
Brand Name	Name that appears on the package label provided by the manufacturer.	Field	Character	35
CMS Package Size	Indicates the number of units per package as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. This column must be used in conjunction with the HCFA Unit Type to determine the appropriate number of units. Format is 99999999.999. Note: Data received from FDB and CMS. Will source from FDB update only if the package size on file is 0. Updates to this data element from the CMS quarterly update will always be applied.	Field	Number (Decimal)	11

Field	Description	Field Type	Data Type	Length
Case Size	Number of usable units in the shipping container. First DataBank uses this number as a divisor to calculate the single package price when case pricing for the NDC is reported to First DataBank; customers can use it as a multiplier to determine the case price from the single package price. When case pricing for the NDC is not reported, the default is 1.	Field	Number (Decimal)	9
Category	Identifies single source, multi-source, or innovator status as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The data is supplied to CMS by the drug labeler.	Combo Box	Drop Down List Box	0
Class	Classifies a drug by its availability to the consumer according to federal specifications. e.g. Over the counter (O) or Legend (F).	Combo Box	Drop Down List Box	0
Covered On	Displays the request date and coverage status of the NDC displayed on the panel. Valid values are 'Yes,' and 'No.'	Field	Character	1
DEA	Drug Enforcement Administration (DEA) Code. Denotes the degree of potential abuse and federal control of a drug. This code is subject to change by federal regulation.	Combo Box	Drop Down List Box	0
Drug Category Code	The Drug Category Code indicates that a drug product belongs to a category that is commonly treated as an exception in third party plans.	Field	Character	100
Drug Form	Indicates the type of billing unit to be used for a product. E.G. Each (tablets, kits, etc.).	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
GCN Seq Number	Clinical Formulation ID. Represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	9
GNI	Generic Name Indicator (GNI). Specifies whether a product is a brand named product, a generically named product, or an alternative product, using the product name as the criteria.	Combo Box	Drop Down List Box	0
GPI	Generic Price Indicator (GPI). Distinguishes a product as either generically priced or priced as a brand.	Combo Box	Drop Down List Box	0
Generic (Code)	Generic Therapeutic Class (GTC) code. Classifies drugs according to the most common intended use. This classification provides the most general therapeutic groupings available from First DataBank. Users that need more definitive therapeutic classing should consider Standard Therapeutic Class (for example).	Field	Number (Integer)	2
Generic (Description)	Text description of the Generic Therapeutic Class.	Field	Character	40
Generic Name	Combination of active ingredient names, route of administration, dosage form, and strength.	Field	Character	63
HIC4 (Code)	Hierarchical Ingredient Code of the primary ingredient.	Field	Character	4
HIC4 (Description)	Text description of the HIC4 Code.	Field	Character	40

Field	Description	Field Type	Data Type	Length
HICL Sequence Number	Ingredient List Identifier. A permanent numeric identifier that identifies a unique combination of active ingredients, irrespective of the manufacturer, package size, dosage form, route of administration, or strength.	Field	Number (Integer)	6
IPI	Identifies products sold only to selected customers, usually at a discounted price. Institutional products are manufacturer-specified; customers must meet the manufacturer's definition of an institution (for example, nursing homes, the Veteran's Administration). 0 - Not Institutional.	Field	Character	1
Ingredients	Ingredient list (commonly referred to as the HICL or HIC List), referenced by the HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.	Listview	N/A	0
Ingredient List	Ingredient list (commonly referred to as the HICL or HIC List), referenced by the HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.	Field	Character	62
Innovator	This field identifies the original innovator product for a particular generic code number. Values are: '0 - No' = non-innovator drug, and '1 - Yes' = Innovator held original patent. It is possible to have more than one product to appear to be the innovator.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Label Name	Combination of the drug name appearing on the package label, the strength description, and the dosage form description for a specified product.	Field	Character	40
Labeler ID	Code that represents the product labeler (a manufacturer, distributor, or repackager). The first character is alphabetic and represents a division within a company. The last five characters are numeric and represent the parent company. Not be confused with the five-digit labeler code that is assigned to a company by the FDA and that comprises the first five digits of an NDC.	Field	Number (Integer)	9
Last AWP Update	Date the AWP (Average Wholesale Price) was last changed according to the NDDF (National Drug Data File).	Field	Date (MM/DD/CCYY)	8
Last NDDF Update	Date on which the drug information was last changed on the NDDF from FDB.	Field	Date (MM/DD/CCYY)	8
Maintenance Drug	Identifies a drug as a maintenance drug.	Field	Character	1
Manufacturer/Distributor	Name of the product labeler (a manufacturer, distributor, or repackager).	Field	Character	15
Market Entry Date	Date a manufacturer releases the drug product to the marketplace. This data is supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is provided to CMS by the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4-digit product code and a 2-digit package code.	Field	Character	11
NDC Format	Defines both the type of external identifying code (NDC, HRI, UPC, or PIN) in the NDC field and the way in which this code has been converted into the 11-digit 5-4-2 format.	Field	Character	9
NDC Status	Displays the NDC Status for the Drug. Possible Values are R-Replace, U-Reuse and Blank.	Field	Character	13
NDDF Add	Date on which the drug record was added to the National Drug Data File (NDDF) from FDB.	Field	Date (MM/DD/CCYY)	8
OBC3 (Code)	Orange Book Code; 3-Byte Version (OBC3). Identifies the equivalency ratings assigned to approved prescription products according to the FDA's Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book). When there is not a three-byte code in the Orange Book, the default OBC3 is the two-byte OBC plus a trailing blank.	Field	Character	3
OBC3 (Description)	Text description of the 3-Byte Orange Book Code (OBC3).	Field	Character	30
Obsolete Date	Date when the drug product is no longer available on the market place as per the manufacturer's notification, or the best estimate of that date.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Package	Description of the container that is in direct contact with the product. First DataBank obtains the Package Description from the product package insert and abbreviates to keep package description terms within 10 characters.	Combo Box	Drop Down List Box	0
Package Size	Metric quantity used to derive a unit price. The usual labeled quantity from which the pharmacist dispenses, such as 100 tablets, 1000 capsules, 20 ml vial, etc. Format is 99999999.999.	Field	Number (Decimal)	11
Previous NDC	Previous/Old NDC if the current NDC is a replacement NDC.	Field	Number (Integer)	11
Repack	Identifies a product as repackaged or not repackaged. 0 - Not repackaged 1 – Repackaged.	Field	Character	1
Replaced by NDC	Replacement/New NDC if the current NDC has been changed or replaced by the labeler. An NDC must be obsolete in order for a replacement to be assigned, and the Brand Name (BN), formulation, and package size must be the same for the old and new NDC.	Field	Number (Integer)	11
Schedule Code	The unique two character code for the description of the Alabama Schedule.	Field	Character	2
Shelf Pack	Number of bundled salable units in the shipping container.	Field	Number (Integer)	9
Shipper Quantity	Number of salable units in the minimum order quantity available from the distributor; it is usually a multiple of the Shelf Pack or Case Pack.	Field	Number (Integer)	9

Field	Description	Field Type	Data Type	Length
Source	NDC-level single-source or multi-source indicator. Specifies whether a product's generic formulation (i.e. its particular active ingredient, dosage form, route of administration and strength) is only available from a single distributor or from multiple distributors.	Combo Box	Drop Down List Box	0
Specific (Code)	Hierarchical Specific Therapeutic Class Code (HIC3). Identifies the specific therapeutic class in which the active ingredient is classified.	Field	Character	3
Specific (Description)	Text description of the Specific Therapeutic Class.	Field	Character	40
Standard (Code)	Standard Therapeutic Class (TC) Code. Classifies drugs according to the most common intended use. This therapeutic classification is intended to service those users who need a definitive but not comprehensive therapeutic classification system. A more comprehensive therapeutic classification is provided by Specific Therapeutic Class (for example).	Field	Number (Integer)	2
Standard (Description)	Text Description of the Standard Therapeutic Class.	Field	Character	40
Standard Package	Indicates whether the product package size is the standard package size.	Combo Box	Drop Down List Box	0
Status	Identifies the status of a drug within interChange. A drug is marked as either Active (A) or Inactive (I). This information is used to allow the user to review additions and updates to a drug before it is activated for use by interChange.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Termination Date	Shelf-life expiration date of the last batch of product produced, as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is supplied to CMS from the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8
Therapeutic Equivalency (Code)	CMS FDA Therapeutic Equivalency Code. Provided from CMS's quarterly tape and is a 2 character code, as indicated by the U.S. Food and Drug's Administration's (FDA) rating of the therapeutic equivalence of a product within other pharmaceutically equivalent drug products, as published.	Field	Character	2
Therapeutic Equivalency (Description)	Text description of the CMS FDA Therapeutic Equivalency Code. Provided from CMS's quarterly tape and is a 2 character code, as indicated by the U.S. Food and Drug's Administration's (FDA) rating of the therapeutic equivalence of a product within other pharmaceutically equivalent drug products, as published.	Field	Character	100
Top Volume Ranking	Indicates if a drug is included in the list of the most frequently dispensed 200 drug products. Different package sizes and dose forms of the same drug have the same number. This field is based on pharmaceutical market research surveys and originates from First DataBank.	Field	Number (Integer)	4

Field	Description	Field Type	Data Type	Length
Unit	Indicates the unit of measure as supplied on the Health Care Financing Administration's quarterly tape. Note: Data received from FDB and CMS. Will source from FDB update only if the CMS unit file is blank. Updates from the CMS quarterly update will always be applied.	Field	Character	3
Unit Dose	Marks a drug as packaged in unit doses. Unit dose is defined by FDB as all products labeled as Unit Dose by the manufacturer. This indicator does not apply to injectable products, suppositories, or powder packets. Products labeled as Unit Dose are not sold as individual unit doses; rather, the product is sold in a package that contains several Unit Doses.	Combo Box	Drop Down List Box	0
Unit of Use	Identifies products that are packaged per course of therapy. Products are labeled as Unit of Use by the manufacturer. These products are supplied with appropriate labeling and (usually) child resistant closures, and thus are appropriate to dispense as a unit.	Combo Box	Drop Down List Box	0
Update Indicator	Indicates whether batch update to the NDC should be allowed.	Combo Box	Drop Down List Box	0

6.28.4 Base Information-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
AHFS (Code)	Field	1	Enter a valid value.	Enter a numeric value.
Approval Date	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	Approval Date must be greater than or equal to 01/01/1900.	Enter an Approval Date that is greater than or equal to 01/01/1900.
	Field	3	Approval Date must be less than or equal to 12/31/2299.	Enter an Approval Date that is less than or equal to 12/31/2299.

Field	Field Type	Error Code	Error Message	To Correct
CMS Package Size	Field	1	CMS Package Size must be greater than or equal to 00000000.000.	Enter a positive value.
	Field	2	CMS Package Size must be less than or equal to 99999999.999.	Enter a lower value.
Case Size	Field	1	Enter a valid value.	Enter a numeric value.
Labeler ID	Field	1	Enter a valid value.	Enter a numeric value.
Last AWP Update	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	Last AWP Update must be greater than or equal to 01/01/1900.	Enter a Last AWP date that is greater than or equal to 01/01/1900.
	Field	3	Last AWP Update must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Last NDDF Update	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	Last NDDF Update must be greater than or equal to 01/01/1900.	Enter a date that is greater than or equal to 01/01/1900.
	Field	3	Last NDDF Update must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Market Entry Date	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	Market Entry Date must be greater than or equal to 01/01/1900.	Enter a date that is greater than or equal to 01/01/1900.
	Field	3	Market Entry Date must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
NDDF Add	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	NDDF Add must be greater than or equal to 01/01/1900.	Enter a date that is greater than or equal to 01/01/1900.
	Field	3	NDDF Add must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Obsolete Date	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.

Field	Field Type	Error Code	Error Message	To Correct
	Field	2	Obsolete Date must be greater than or equal to 01/01/1900.	Enter a date that is greater than or equal to 01/01/1900.
	Field	3	Obsolete Date must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Package Size	Field	1	Package Size must be greater than or equal to 00000000.000.	Enter a positive value.
	Field	2	Package Size must be less than or equal to 99999999.999.	Enter a lower value.
Shelf Pack	Field	1	Enter a valid value.	Enter a numeric value.
Shipper Quantity	Field	1	Enter a valid value.	Enter a numeric value.
Termination Date	Field	1	Invalid date.	Enter a date in MM/DD/CCYY format.
	Field	2	Termination Date must be greater than or equal to 01/01/1900.	Enter a date that is greater than or equal to 01/01/1900.
	Field	3	Termination Date must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Top Volume Ranking	Field	1	Enter a valid value.	Enter a numeric value.
Update Indicator	Field	1	Update Indicator is required.	Select a value from the drop down list.

6.28.5 Base Information-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.28.6 Base Information-Drug Panel Accessibility

6.28.6.1 To Access the Base Information-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance panel displays.
6	Click Base Information .	Base Information-Drug panel displays.

6.28.6.2 To Update on the Base Information-Drug Panel

Step	Action	Response
1	Click in desired field to update and perform update.	
2	Click Save .	Base Information -Drug information is saved.

6.29 Benefit Plan Coverage Rules-Drug Panel

6.29.1 Benefit Plan Coverage Rules-Drug Panel Narrative

The Benefit Plan Coverage Rules-Drug panel is used to view the member plan coverage information for a specific drug code.

This panel is display only.

Navigation Path: [Reference] – [Drug] - (click on [search] and select row from search results) - [Drug Maintenance] - [Drug] - [Benefit Plan Coverage Rules]

6.29.2 Benefit Plan Coverage Rules-Drug Panel

Benefit Plan Coverage Rules										Top	Nav	?	⌵	✕
{Recipient} Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date						
ALIEN	Alien Emergency Services	Benefit Plan	None	Default	No	No	01/01/1960	12/31/2299						

6.29.3 Benefit Plan Coverage Rules- Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Identifies the associated list of claim types as included or excluded for the covered benefit.	Combo Box	Drop Down List Box	0
Copay Allowed	Yes/No indicator used to identify programs that qualify for copay calculations during claims payment determination.	Field	Character	3
Description	Description of the Recipient Plan.	Field	Character	50
Effective Date	Date the Recipient Plan becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective date.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Recipient Plan becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this benefit plan.	Field	Character	30
Plan Type	Type of plan is either an Assignment Plan (ASGN) or a Benefit Plan (BNFT).	Field	Character	15
Recipient Only	Yes/No indicator used to identify programs that are used for recipient enrollment only. No services are covered by the program.	Field	Character	3
Recipient Plan	Code that identifies the recipient plan that is supported in the system.	Field	Character	5

6.29.4 Benefit Plan Coverage Rules- Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.29.5 Benefit Plan Coverage Rules- Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.29.6 Benefit Plan Coverage Rules- Drug Panel Accessibility

6.29.6.1 To Access the Benefit Plan Coverage Rules-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Click Search .	Reference Drug Search Results panel displays.
4	Select row.	Drug Information panel displays.
5	Click Benefit Plan Coverage Rules .	Benefit Plan Coverage Rules-Drug panel displays.

6.30 Contract Billing Rules-Drug Panel

6.30.1 Contract Billing Rules- Drug Panel Narrative

The Contract Billing Rules-Drug panel is used to display Provider Contracts applicable to drugs.

This panel is display only.

Navigation Path: [Reference] - [Drug] - (Click on [Search] button) - (Select row from search results) - [Drug Maintenance] - [Contract Billing Rules]

6.30.2 Contract Billing Rules- Drug Panel Layout

Contract Billing Rules							Top	Nav	?	⌵	✕
Provider Contract	Financial Payer	Description	Claim Type Edits	Effective Date	End Date	Inactive Date					
LTC	Default	LTC Waiver		01/01/1960	12/31/2299	12/31/2299					
NET	Default	Non Emergency Trans		01/01/1960	12/31/2299	12/31/2299					
01/05/2006											
Open Coverage (No Restrictions)											
01/06/2006											

6.30.3 Contract Billing Rules- Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Attribute indicates what type of claim type to program editing is to be performed. If the indicator is set to 'N' (non), no claim type to program editing is performed. If the indicator is set to 'I' (include), only the claim types listed are billable for the specified program. If the indicator is set to 'E' (exclude), the claim types listed are not billable for the specified program.	Field	Character	1
Description	Description of the provider contract.	Field	Character	30
Effective Date	Date the Provider Contract becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective dates.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Provider Contract becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this provider contract.	Field	Character	30
Inactive Date	Date/Time the Provider Contract can no longer be used regardless of dates of service on the claim.	Field	Date (MM/DD/CCYY)	8
Provider Contract	Classification of services a Provider can bill. A provider may have multiple contracts.	Field	Character	5

6.30.4 Contract Billing Rules- Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.30.5 Contract Billing Rules- Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.30.6 Contract Billing Rules- Drug Panel Accessibility

6.30.6.1 To Access the Contract Billing Rules-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Click Search .	Reference Drug Search Results panel displays.
4	Select row.	Drug Information panel displays.
5	Click Contract Billing Rules .	Contract Billing Rules panel displays.

6.31 DESI-Drug Panel

6.31.1 DESI-Drug Panel Narrative

Reference - Drug Efficacy Study Implementation panel.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug (Search)] - (click on [search] button) - (select row from search results) - [Drug Maintenance] - [Drug] - [Drug Efficacy Study Implementation] (The state DESI portion of the panel only displays if the drug has a state DESI))

6.31.2 DESI-Drug Panel Layout

DESI

Top Nav ? A ⬆ ⬇ X

DESI Types DESI Code Status DESI Source Effective Date End Date

A

A

Select row above to update -or- click Add button below.

DESI Types* DESI Drug Indicator DESI on the NDDF

Status

Effective Date*

DESI Code

DESI Source* CMS

End Date*

delete add

6.31.3 DESI-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a 'State DESI' record to this Drug.	Button	N/A	0
Delete	Delete a 'State DESI' record from this Drug.	Button	N/A	0
DESI Code	The code identifies the DESI status of the NDC drug with current valid values of 0-6. The DESI Drug Indicator (DESI) marks a particular drug as declared less than effective by the Food and Drug Administration. The CMS DESI Code (CMS_DESI) indicates the DESI code as supplied on the CMS's quarterly tape.	Combo Box	Drop Down List Box	0
DESI Source	Indicates the source used to update the DESI: CMS or FDB.	Combo Box	Drop Down List Box	0
DESI Types	Code used to indicate the DESI (Drug Efficacy Study Implementation) type. DESI Drug Indicator DESI on the NDDF. DESI 2 Drug Indicator on the NDDF. CMS DESI code on the NDDF.	Combo Box	Drop Down List Box	0
Effective Date	The date at which the drug became Drug Efficacy Study Implementation, signified as less than effective.	Field	Date (MM/DD/CCYY)	8
End Date	The last date at which this DESI is effective; it is possible for a drug to be removed from DESI non payable status.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Status	This indicates whether the DESI segment is in an active or inactive status. Only active segments are used for claims processing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0

6.31.4 DESI-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
DESI Source	Field	1	DESI Source is required.	Select a valid DESI Source from the drop down box.
DESI Types	Field	1	DESI Types is required.	Select a DESI Types from the drop down box.
Effective Date	Field	1	Effective Date is required.	Enter a valid date in MM/DD/CCYY format.
	Field	2	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	3	Invalid date.	Enter an Effective Date in MM/DD/CCYY format.
	Field	4	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
	Field	5	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	6	Date and DESI Type range segments can not overlap.	Enter a Date and DESI Type range segments that does not overlap.
End Date	Field	1	End Date is required.	Enter an End Date in MM/DD/CCYY format.
	Field	2	Effective Date must be less than or equal to end date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	3	Invalid date.	Enter an End Date in MM/DD/CCYY format.
	Field	5	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	6	Date and DESI Type range segments can not overlap.	Enter a Date and DESI Type range segments that do not overlap.

6.31.5 DESI-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.31.6 DESI-Drug Panel Accessibility

6.31.6.1 To Access the DESI-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click DESI .	DESI-Drug panel displays.

6.31.6.2 To Add on the DESI-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select DESI Type from drop down list box.	
3	Select Status from drop down list box.	
4	Enter Effective Date in MM/DD/CCYY format.	
5	Select DESI Code from drop down list box.	
6	Select DESI Source from drop down list box.	
7	Enter End Date in MM/DD/CCYY format.	
8	Click Save .	DESI-Drug information is saved.

6.31.6.3 To Update on the DESI-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	DESI -Drug information is saved.

6.31.6.4 To Delete on the DESI-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.32 Drug Group-Drug Panel

6.32.1 Drug Group-Drug Panel Narrative

The Drug Group panel is used to view all drug groups of which the selected drug is a member.

This panel is display only.

Navigation Path: [Reference] – [Drug] - [(click on 'search' button)] - [(select a row from search result list)] - [Drug Maintenance] - [Drug Group]

6.32.2 Drug Group-Drug Panel Layout

Drug Group					
Group	Description	NDC From	NDC To	Effective Date	End Date
102	Drug Group Test	00071015523	00071015523	08/26/2005	12/31/2299
103	Drug Group Test 2	00071015124	00071015540	08/26/2005	12/31/2299

6.32.3 Drug Group-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Describes the drug group type.	Field	Character	50
Effective Date	The date that the drug group is to become effective for the drug type in claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date that the drug group is no longer in effect for the drug type in claims processing.	Field	Date (MM/DD/CCYY)	8
Group	System assigned key for a unique drug type that represents a collection of drug codes.	Field	Number (Integer)	9
NDC From	Drug Code Range From (relation from T_DRUG_GROUP.SAK_DRUG_FROM).	Field	Character	30
NDC To	Drug Code Range To (relation from T_DRUG_GROUP.SAK_DRUG_TO).	Field	Character	30

6.32.4 Drug Group-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for thispanel.				

6.32.5 Drug Group-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.32.6 Drug Group-Drug Panel Accessibility

6.32.6.1 To Access the Drug Group-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Drug Group .	Drug Group-Drug panel displays.

6.33 Drug Rejection Criteria-Drug Panel

6.33.1 Drug Rejection Criteria-Drug Panel Overview

The Drug Rejection Criteria-Drug panel displays drug fields used to determine if a drug meets Alabama's rejection criteria, and is therefore, not covered. The rejection criteria is: Obsolete for more than one year; CMS Terminated for more than one year; DESI; Repackaged Products; Labeler does not participate in rebate.

Do Not Reject = YES indicates the NDC is not rejected, even if it meets other rejection criteria. Reject Regardless = YES indicates the NDC is rejected, even if it does not meet other rejection criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Drug] - [(click on 'search' button)] - [(select a row from search result list)] - [Drug Maintenance] - [Drug Rejection Criteria]

6.33.2 Drug Rejection Criteria-Drug Panel Layout

Drug Rejection Criteria	
NDC CODE	00002035302
Obsolete Date	01/12/2004***
Termination Date	
Desi	NO
Repack	0 - Not Repackaged
Rebate Status	Participating
Do Not Reject	NO
Reject Regardless	NO

*** Indicates drug meets rejection criteria

6.33.3 Drug Rejection Criteria-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
DESI	Drug Efficacy Study Implementation Code. This is the DESI Code as supplied on NDDF. The NDDF maintains three levels of DESI: DESI, DESI2, and CMS DESI. Please see NDDF documentation for current valid values and definitions. On this panel, YES indicates the drug is designated as DESI, and NO indicates it is not DESI.	Field	Alphanumeric	3
Do Not Reject	Do not reject this drug. This field indicates that the drug belongs to the "Do Not Reject" drug group.	Field	Character	3
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4 digit product code and a 2 digit package code.	Field	Number (Integer)	11

Field	Description	Field Type	Data Type	Length
Obsolete Date	Date when the drug product is no longer available on the market place as per the manufacturer's notification, or the best estimate of that date.	Field	Date (MM/DD/CCYY)	8
Rebate Status	Indicates the drug's labeler participates in the federal rebate program.	Field	Character	30
Reject Regardless	Reject this drug regardless of the criteria. This field indicates that the drug belongs to the "Reject Regardless" drug group.	Field	Character	3
Repack	Identifies a product as repackaged or not repackaged. Valid values include: 0 - Not repackaged 1 – Repackaged	Field	Drop Down List Box	0
Termination Date	Shelf-life expiration date of the last batch of product produced, as supplied on the Centers for Medicare and Medicaid Services' (CMS, formerly HCFA) quarterly update. The date is supplied to CMS from the drug labeler. Note: Data received from FDB and CMS. Will source from FDB update only if a date is not already on file. Updates to this data element from the CMS quarterly update will always be applied.	Field	Date (MM/DD/CCYY)	8

6.33.4 Drug Rejection Criteria-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.33.5 Drug Rejection Criteria-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.33.6 Drug Rejection Criteria-Drug Panel Accessibility

6.33.6.1 To Access the Drug Reject Criteria-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Drug Rejection Criteria .	Drug Rejection Criteria-Drug panel displays.

6.34 Federal MAC Rate-Drug Panel

6.34.1 Federal MAC Rate-Drug Panel Narrative

The Federal MAC panel is used to maintain the Federal Maximum Allowable Cost (MAC) for a drug, along with its effective dates and status.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference]- [Drug] - [(click on 'search' and select row from search results)] - [Drug Maintenance] - [Federal MAC or Pricing]

6.34.2 Federal MAC Rate-Drug Panel Layout

Federal MAC Rate

Federal MAC Price	Status	Effective Date	End Date
\$692.39000	Active	11/20/2009	12/31/2299

Select row above to update -or- click Add button below.

Federal MAC Price: Effective Date:

Status: End Date:

Note : Price Update Indicator is set to Yes

6.34.3 Federal MAC Rate-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Button used to add a new MAC pricing record for this drug.	Button	N/A	0
Delete	Button used to delete an existing pricing record from this drug.	Button	N/A	0
Effective Date	The date that the drug's Federal MAC takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	The date that the Federal MAC is no longer in effect.	Field	Date (MM/DD/CCYY)	8
Federal MAC Price	The Federal Maximum Allowable Cost (MAC) for a drug, also called the Federal Upper Limit (FUL). The MAC is the unit price for a drug under Federal MAC regulation. Format is \$9,999,999.99999.	Field	Number (Decimal)	12
Note	Indicates whether Federal MAC rate can be updated via Batch. Default value is 'Yes.'	Button	N/A	0
Status	Indicates whether the MAC pricing segment is in an active or inactive status. Only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0

6.34.4 Federal MAC Rate-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Verify that Effective Date and End Date do not overlap existing dates.
	Field	3	Effective date is required.	Enter a valid Effective Date.
	Field	4	Effective Date must be less than or equal to End Date.	Enter an Effective Date that is less than or equal to End Date.
	Field	15	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	16	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
	Field	91001	Invalid date.	Enter a valid date in MM/DD/CCYY format.
End Date	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Verify that Effective Date and End Date do not overlap existing dates.
	Field	3	End Date is required.	Enter an End Date.
	Field	15	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	16	End Date must be less than or equal to 12/31/2299	Enter an End Date that is less than or equal to 12/31/2299.
	Field	91001	Invalid date.	Enter a valid date in MM/DD/CCYY format.
Federal MAC Price	Field	1	Federal MAC Price must be greater than or equal to 0000.00000.	Re-enter Federal MAC price.
	Field	7	Federal MAC Price must be less than or equal to \$9,999,999.99999.	Enter a valid Federal MAC Price.
	Field	8	Federal MAC price is required.	Verify keying. Enter a valid value.
	Field	9	Enter a valid value.	Enter a valid Federal MAC Price.
Status	Field	1	Status is required.	Select a Status.

6.34.5 Federal MAC Rate-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.34.6 Federal MAC Rate-Drug Panel Accessibility

6.34.6.1 To Access the Federal MAC Rate-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Federal MAC Rate .	Federal MAC Rate -Drug panel displays.

6.34.6.2 To Add on the Federal MAC Rate-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Federal MAC Price .	
3	Enter Status .	
5	Enter Effective Date in MM/DD/CCYY format.	
6	Enter End Date in MM/DD/CCYY format.	
9	Click Save .	Federal MAC Rate-Drug information is saved.

6.34.6.3 To Update on the Federal MAC Rate-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Federal MAC Rate -Drug information is saved.

6.34.6.4 To Delete on the Federal MAC Rate-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.

2	Click Delete .	Line item is deleted.
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6.35 Generic Drug-Drug Panel

6.35.1 Generic Drug-Drug Panel Narrative

The Generic Drug panel displays additional 'Generic Drug' information for the NDC. This panel is inquiry only. This panel is display only.

Navigation Path: [Reference] – [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Drug Maintenance] - [Generic Drug]

6.35.2 Generic Drug-Drug Panel Layout

Generic Drug		Top	Nav	?	A	X
Generic Name	CASCARA SAGRADA ORAL FL EXTRACT	GCN Seq No	2894			
Generic Thera Class	65 GASTROINTESTINAL	HICL Seq No	1279			
Standard Thera Class	06 LAXATIVES	Gender Specific	0 - Neutral; not gender specific			
Specific Thera Class	D6S LAXATIVES AND CATHARTICS	Dosage Form	SB - FL EXTRACT			
Ingredient List	D6SA	Route	PO - ORAL			
HIC4	D6SA CASCARA SAGRADA	Strength				

6.35.3 Generic Drug-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Dosage Form	Describes the physical presentation of a drug, such as tablet, capsule, or liquid. It may also incorporate the delivery and release mechanism of the drug.	Field	Character	2
GCN Seq No	Clinical Formulation ID.Represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	9
Gender Specific	Identifies drugs that are used for a specific gender.	Field	Character	1
Generic Name	Combination of active ingredient names, route of administration, dosage form, and strength.	Field	Character	63

Field	Description	Field Type	Data Type	Length
Generic Thera Class (Code)	Generic Therapeutic Class Code (GTC). Classifies drugs according to the most common intended use. This classification provides the most general therapeutic groupings available from First DataBank. Users that need more definitive therapeutic classing should consider Standard Therapeutic Class, Specific Therapeutic Class or AHFS Therapeutic Class (for example).	Field	Character	3
Generic Thera Class (Description)	Text description of the Generic Therapeutic Class code.	Field	Character	50
HICL Seq No	Ingredient List Identifier. A permanent numeric identifier that identifies a unique combination of active ingredients, irrespective of the manufacturer, package size, dosage form, route of administration, or strength.	Field	Number (Integer)	6
HIC4 (Code)	Hierarchical Ingredient Code of the main ingredient contained in the drug.	Field	Character	4
HIC4 (Description)	Text description of the HIC4 code.	Field	Character	50
Ingredient List	Ingredient list (commonly referred to as the HICL or HIC List), referenced by the HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.	Field	Character	54
Route	Refers to the normal site or method by which a drug is administered (Route of Admin) to the body, such as oral, injection, or topical.	Field	Character	2
Specific Thera Class (Code)	Hierarchical Specific Therapeutic Class Code (GC3, Alias HIC3). Identifies the specific therapeutic class in which the active ingredient is classified.	Field	Character	3
Specific Thera Class (Description)	Text description of the Specific Therapeutic Class code.	Field	Character	50
Standard Thera Class (Code)	Standard Therapeutic Class code that classifies drugs according to the most common intended use.	Field	Character	3
Standard Thera Class (Description)	Text description of the Standard Therapeutic Class code.	Field	Character	50

Field	Description	Field Type	Data Type	Length
Strength	Refers to the potency of the drug and is usually expressed in a metric quantity, such as 500 MG.	Field	Character	30

6.35.4 Generic Drug-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.35.5 Generic Drug-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.35.6 Generic Drug-Drug Panel Accessibility

6.35.6.1 To Access the Generic Drug-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Generic Drug .	Generic Drug panel displays.

6.36 HCPCS Procedure-Drug Panel

5.29.1 HCPCS Procedure-Drug Panel Narrative

The HCPCS Procedure panel is an 'inquiry only' panel that lists the cross reference(s) between the selected NDC and associated HCPCS procedures (if applicable). HCPCS procedure codes are much more generic than NDCs and thus may have a many to 1 relationship (i.e. HCPCS to NDC).

Navigation Path: [Reference] – [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Drug Maintenance] - [HCPCS Procedure]

5.29.2 HCPCS Procedure-Drug Panel Layout

NDC/HCPCS Procedure Top Nav ? A X

NDC [Search] HCPCS Code [Search] search clear

NDC	HCPCS Code	Effective Date	End Date	System Updatable
00002032902	0001F	01/01/2007	01/01/2008	N
00002032903	0001T	03/03/2003	04/04/2004	N
00002036303	0006F	01/01/2001	01/01/2003	N
00002050101	J3260	05/05/2005	05/06/2005	N
00002050101	J3260	01/01/2005	03/29/2005	N
00002050101	J3260	05/07/2005	05/09/2005	N
00002050101	J3260	05/10/2005	05/12/2005	N
00002050101	J3260	05/01/2005	05/02/2005	N
00002144425	J3370	01/01/2005	03/31/2005	Y
00002148501	0004F	02/02/2004	03/03/2005	N

1 2 3 4 5 6 7 8 9 10 ... Next >

Select row above to update -or- click Add button below.

NDC [Search] Brand Name [Search]

HCPCS Code [Search] Description [Search]

Effective Date [Search]

End Date [Search]

delete add

5.29.3 HCPCS Procedure-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Clear	Allows user to clear NDC and HCPCS Code text box.	Button	N/A	0
Description	Description of the HCPCS Procedure with chosen 'HCPCS Code'.	Field	Character	40
Effective Date	First date the NDC/HCPCS cross-reference is effective.	Field	Date (MM/DD/CCYY)	8
End Date	Last date the NDC/HCPCS cross-reference is effective.	Field	Date (MM/DD/CCYY)	8
HCPCS Code	Code that uniquely identifies a HCPCS procedure.	Field	Character	5
Search	Allows user to search records on NDC/HCPCS Procedure panel.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
System Updatable	Indicates whether record was inserted/updated from Batch or Manual/UI	Field	Character	1

6.36.1 HCPCS Procedure-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.36.2 HCPCS Procedure-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.36.3 HCPCS Procedure-Drug Panel Accessibility

6.36.3.1 To Access the HCPCS Procedure-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click HCPCS Procedure .	HCPCS Procedure-Drug panel displays.

6.37 Ingredients-Drug Panel

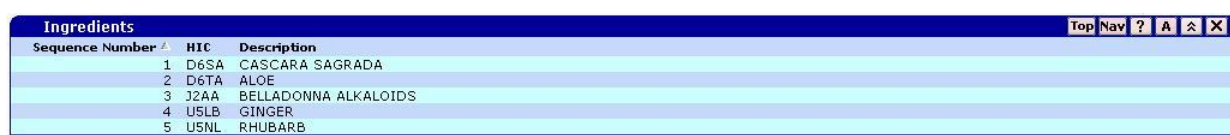
6.37.1 Ingredients-Drug Panel Narrative

The Ingredient List panel displays a list of the ingredients (commonly referred to as the HICL or HIC List) referenced by the drug's HICL Sequence Number. Each active ingredient in the list is sequenced according to its clinical importance relative to other ingredients. The relative importance of an active ingredient is based on its clinical and therapeutic use.

This panel is display only.

Navigation Path: [Reference] – [Drug] - [(Enter search criteria, click on 'search' button, select row from search results)] - [Drug Maintenance] - [Base Information] or [Ingredients]

6.37.2 Ingredients-Drug Panel Ingredients-Drug Layout



Sequence Number	HIC	Description
1	D6SA	CASCARA SAGRADA
2	D6TA	ALOE
3	J2AA	BELLADONNA ALKALOIDS
4	USLB	GINGER
5	USNL	RHUBARB

6.37.3 Ingredients-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Describes the ingredient.	Field	Character	20
HIC	Hierarchical Ingredient Code that identifies the ingredient.	Field	Character	6
Sequence Number	Represents the relative order of the ingredient within the ingredient list.	Field	Number (Integer)	1

6.37.4 Ingredients-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.37.5 Ingredients-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.37.6 Ingredients-Drug Panel Accessibility

6.37.6.1 To Access the Ingredients -Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.

Step	Action	Response
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Ingredients .	Ingredients-Drug panel displays.

6.38 Labeler Rebate Status-Drug Panel

6.38.1 Labeler Rebate Status-Drug Panel Narrative

The Drug Labeler Rebate Status panel displays the dates the drug labeler participated in the drug rebate program. The dates are obtained from the quarterly CMS labeler contact file or from periodic CMS releases. This panel is display only.

Navigation Path: [Reference] – [Drug Search] - (click on [search] and select row from search results) - [Drug Maintenance] - [Labeler Rebate Status]

6.38.2 Labeler Rebate Status-Drug Panel Layout

Labeler Rebate Status					Top	Nav	?	⬆	⬇	⬆	⬇	×
Labeler Code	Name	Rebate Program	Effective Date	End Date								
00002	ELI LILLY AND COMPANY	OO - Federal	01/01/2001	01/01/2002								
00002	ELI LILLY AND COMPANY	OO - Federal	01/01/1991	12/31/2299								
00002	ELI LILLY AND COMPANY	OO - Federal	12/31/2005	12/31/2299								
00002	ELI LILLY AND COMPANY	OO - Federal	01/01/1990	01/01/1990								
00002	ELI LILLY AND COMPANY	OS - Supplemental	01/01/2001	02/01/2001								
00002	ELI LILLY AND COMPANY	OS - Supplemental	01/13/2001	01/23/2001								

6.38.3 Labeler Rebate Status-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Effective Date	This is the date that the rebate status for the drug takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	This is the date that the rebate status for the drug is no longer in effect.	Field	Date (MM/DD/CCYY)	8
Labeler Code	This field is a FDB code used to uniquely identify the distributor.	Field	Character	5
Name	This is the name of the distributor as listed on the drug label or as indicated by the NDC code. It does not necessarily identify the actual drug fabricator.	Field	Character	39
Rebate Program	The code followed by the description of the rebate program. Valid values include: OO = Federal OS = Supplemental	Field	Alphanumeric	35

6.38.4 Labeler Rebate Status-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.38.5 Labeler Rebate Status-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.38.6 Labeler Rebate Status-Drug Panel Accessibility

6.38.6.1 To Access the Labeler Rebate Status-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Labeler Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Labeler Rebate Status .	Labeler Rebate Status -Drug panel displays.

6.39 Note-Drug Panel

6.39.1 Note-Drug Panel Narrative

The Note-Drug panel is used to enter notes as to why changes were made to a specific NDC. Fields included are for date, time, clerk number and note sequence number.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Drug Search] - [(Add button) OR (select row from search results)] - [Drug Maintenance] - [Note]

6.39.2 Note-Drug Panel Note-Drug Layout

The screenshot shows a web application window titled "Note". At the top, there is a table with the following columns: "Sequence Number", "Clerk ID", "Date", "Time", and "Note". The first row of the table contains the values: "1", "CZVTPC", "02/07/2006", "17:06:26", and "first note". Below the table, there is a text area for entering a note. To the left of the text area, there are input fields for "Sequence Number", "Clerk ID", "Date", and "Time". At the bottom right of the window, there are two buttons: "delete" and "add".

6.39.3 Note-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a note.	Button	N/A	0
Clerk identification	The identification of the user who enters the note.	Field	Alphanumeric	8
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Delete	Allows a user to delete a note.	Button	N/A	0
Note	The actual text of the note.	Field	Alphanumeric	1000
Sequence Number	Sequence number that can uniquely identify a note.	Field	Number (Integer)	9
Time	The time that the note was entered.	Field	Number (Decimal)	6

6.39.4 Note-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add Drug Note text.

6.39.5 Note-Drug Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for Proc + 1

Clerk ID - System generated based on users logon id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.39.6 Note-Drug Panel Accessibility

6.39.6.1 To Access the Note-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Note .	Note-Drug panel displays.

6.39.6.2 To Add on the Note-Drug Panel

Step	Action	Response
1	Click Add . Sequence Number, Date and Time automatically populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note -Drug information is saved.

6.39.6.3 To Update on the Note-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Note -Drug information is saved.

6.39.6.4 To Delete on the Note-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.40 Other Rates-Drug Panel

6.40.1 Other Rates-Drug Panel Narrative

The Other Rates panel provides the flexibility to maintain other drug price types such as 'Direct' and 'WAC'.

Only authorized users are allowed to perform maintenance tasks.

In addition to AWP and Federal MAC prices, FDB (First DataBank) supplies additional price types which may be used for pricing or for reference purposes. These additional price types include:

- 01-BB-Blue Book AWP Unit Price
- 02-BBPKG -Blue Book AWP Package Price
- 05-DIR-Direct Unit Price
- 06-DIRPKG-Direct Package Price
- 09-WHN-Wholesale Acquisition Cost (WAC) Unit Price (already includes logic of +9.2%)
- 10-WHNPKG-Wholesale Acquisition Cost (WAC) Package Price
- 11-FFPUL-Federal Financing Participation Upper Limits
- 12-ABP-Alternative Benchmark Price (ABP) Unit Price
- 13-ABPPKG-Alternative Benchmark Price (ABP) Package Price
- 99-MBBX-Medicaid Blue Book Price/Department of Justice (DOJ) Price
- AW-ALWAC-Converted from Alabama WAC (AL Selected) Price
- MA-ALMACA-Converted from Alabama MAC price with MAC indicator = A
- MW-ALMACW-Converted from Alabama MAC price with MAC indicator = W
- M-ALMAC-Converted from Alabama MAC price with MAC indicator = SPACE

Any or all of the above price types may be maintained as desired/required.

Navigation Path: [Reference] – [Drug] – [(Enter search criteria, click on 'search' button, select row from search results)] – [Drug Maintenance] – [Other Rate or Pricing]

6.40.2 Other Rates-Drug Panel Layout

Price Type	Price	Status	Effective Date	End Date
ALMAC	\$0.00000	Inactive	07/12/2002	12/31/2299

Type changes below.

Price Type: M - Converted from Alabama MAC price with MAC indicator = SPACE

Price*: \$0.00000

Status*: Inactive

Effective Date*: 07/12/2002

End Date*: 12/31/2299

delete add N

6.40.3 Other Rates-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new pricing segment.	Button	N/A	0
Delete	Allows the user to mark a pricing segment for deletion.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
Effective Date	First date of service the pricing segment is effective.	Field	Date (MM/DD/CCYY)	8
End Date	Last date of service the pricing segment is effective.	Field	Date (MM/DD/CCYY)	8
Price	Price amount for the relevant Price Type. E.G. Direct Unit Price. Format is \$9,999,999.99999	Field	Number (Decimal)	12
Price Type	FDB (First DataBank) Price Type code and description. Indicates the type of price for the relevant pricing segment. Valid values include: <ul style="list-style-type: none">01-BB-Blue Book AWP Unit Price02-BBPKG -Blue Book AWP Package Price05-DIR-Direct Unit Price06-DIRPKG-Direct Package Price09-WHN-Wholesale Acquisition Cost (WAC) Unit Price (already includes logic of +9.2%)10-WHNPKG-Wholesale Acquisition Cost (WAC) Package Price11-FFPUL-Federal Financing Participation Upper Limits12-ABP-Alternative Benchmark Price (ABP) Unit Price13-ABPPKG-Alternative Benchmark Price (ABP) Package Price99-MBBX-Medicaid Blue Book Price/Department of Justice (DOJ) PriceAW-ALWAC-Converted from Alabama WAC (AL Selected) PriceMA-ALMACA-Converted from Alabama MAC price with MAC indicator = AMW-ALMACW-Converted from Alabama MAC price with MAC indicator = WM-ALMAC-Converted from Alabama MAC price with MAC indicator = SPACE	Combo Box	Drop Down List Box	0
Status	Indicates whether the status of the pricing segment is 'Active' or 'Inactive'. Based upon date of process, only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0

6.40.4 Other Rates-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an Effective Date that is less than or equal to the End Date.
	Field	2	Invalid Date.	Enter an Effective Date in MM/DD/CCYY format.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	4	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
	Field	5	Effective Date is required.	Enter an Effective Date.
End Date	Field	1	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	2	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
	Field	3	End Date is required.	Enter an End Date.
	Field	4	Invalid Date.	Enter an End Date in MM/DD/CCYY format.
Price	Field	1	Price is required.	Select a value from the Price drop down box.
	Field	2	Price must be less than or equal to 9999999.99999.	Enter a price that is less than or equal to 9999999.99999.
Price Type	Field	1	A valid Price Type is required.	Select a value from the Price Type drop down box.
Status	Field	1	Active Pricing Segments may not overlap for the same Price Type.	Enter an Active Pricing Segment that does not overlap an existing Price Type.
	Field	2	Status is required.	Select a valid Status from the drop down box.

6.40.5 Other Rates-Drug Panel Extra Features

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.40.6 Other Rates-Drug Panel Accessibility

6.40.6.1 To Access the Other Rates-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click	Main Menu page displays.

Step	Action	Response
	Login.	
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Other Rate .	Other Rates -Drug panel displays.

6.40.6.2 To Add on the Other Rates-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Price Type from drop down list box.	
3	Enter Price .	
4	Select Status from drop down list box.	
5	Enter Effective Date in MM/DD/CCYY format.	
6	Enter End Date in MM/DD/CCYY format.	
7	Click Save .	Other Rates-Drug information is saved.

6.40.6.3 To Update on the Other Rates-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Other Rates-Drug information is saved.

6.40.6.4 To Delete on the Other Rates-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.41 PDL History Panel

6.41.1 PDL History Panel Narrative

PDL (Preferred Drug List) History Panel is accessible from the Drug Maintenance Panel. PDL History Panel includes the viewing of the PDL History of a drug (NDC).

This panel is display only.

Navigate to [Reference] – [Drug]-[click on Search button]- [Drug Maintenance] –[Base Information] –[PDL History]

6.41.2 PDL History Panel Layout

PDL History											Top Nav ? A X
PREF Indicator	AHFS	Ther Class	GSN	ALGI	Drug Class	From Age	To Age	Effective Date	End Date	Cancel Ind	Last Change Date
Y	121204	J1A	123456	1	F	0	999	12/12/2001	12/31/2299		01/13/2003
N	123412	J1H	123564	2	O	0	999	12/12/2001	12/31/2299	Y	12/12/1997

6.41.3 PDL History Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
AHFS	Identifies the pharmacological therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	10
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 – Non-drug item 1 – Generic Product 2 – Brand Product.	Field	Character	1
Cancel Ind	Indicates the PDL status for the NDC. If the status for the Cancel Indicator is Yes, record is cancelled from PDL.	Field	Character	1
Drug Class	Classifies a drug by its availability to the consumer according to federal specifications. Values may change even after the NDC has become obsolete. Valid Values are: O = Over-the-Counter. A prescription is not required per the product labeling. F = Federal Legend. A prescription is required per the product labeling.	Field	Character	1
Effective Date	First date the PDL status is effective for the NDC.	Field	Date (MM/DD/CCYY)	8
End Date	Date that PDL status is no longer effective.	Field	Date (MM/DD/CCYY)	8
From Age	The minimum age on the date of service that the NDC is covered with the PDL.	Field	Number (Integer)	3

Field	Description	Field Type	Data Type	Length
GSN	The Generic Code Number Sequence Number is a unique number representing a generic formulation. It is specific to the generic ingredient(s), route of administration, and drug strength. It is the same across manufacturers.	Field	Number (Integer)	6
Last Change Date	Date when the last changes for the line segment were made.	Field	Date (MM/DD/CCYY)	8
PREF Indicator	Preferred Indicator. Indicates the PDL Status of the NDC. Example: Whether the drug or drug product is preferred (Y) or non-preferred (N).	Field	Character	1
Ther Class	Therapeutic Class Code, Specific (GC3, Alias HIC3) The most specific therapeutic class code offered by First DataBank intended for users who need a very definitive therapeutic classification system.	Field	Character	3
To Age	The maximum age on the date of service that the NDC is covered within the PDL.	Field	Number (Integer)	3

6.41.4 PDL History Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.41.5 PDL History Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.41.6 PDL History Panel Accessibility

6.41.6.1 To Access the PDL History Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click PDL History .	PDL History panel displays.

6.42 Price Update Indicators Panel

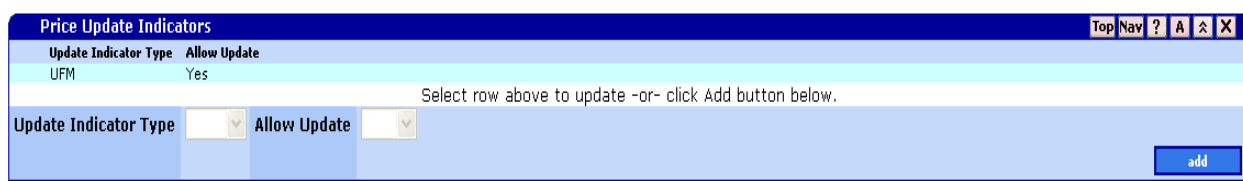
6.42.1 Price Update Indicators Panel Narrative

The purpose of Price Update Indicators panel is to create the indicator which will allow / disallow updating of State / Federal MAC rate of the particular Drug.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug] - click 'search' and select row from search results)) - [Drug Maintenance] - [Price Update Indicators]

6.42.2 Price Update Indicators Panel Layout



6.42.3 Price Update Indicators Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Button used to add a new Price Update Indicator record	Button	N/A	0
Update Indicator Type	Indicates the drug pricing type affected by the value in the Allow Update field. Valid values are: UFM (Update Federal MAC) and USM (Update State MAC).	Combo Box	Drop Down List Box	0
Allow Update	Indicates whether batch updating is allowed for the associated drug pricing type	Combo Box	Drop Down List Box	0

6.42.4 Price Update Indicators Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
Update Indicator Type	Field	1	Indicator Type is required.	Select Update Indicator Type.
Allow Update	Field	2	Allow Update value is required.	Select Allow Update value.
	Field	3	Indicator Type is Duplicate.	Update the existing record for the specific Indicator type.

6.42.5 Price Update Indicators Panel Extra Features

Field	Field Type
-------	------------

Field	Field Type
No extra features found for this panel.	

6.42.6 Price Update Indicators Panel Accessibility

6.42.6.1 To Access the Price Update Indicators Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Price Update Indicators .	Price Update Indicators panel displays.

6.42.6.2 To Add on the Price Update Indicators Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Update Indicator Type .	
3	Enter Allow Update .	
4	Click Save .	Price Update Indicators -Drug information is saved.

6.42.6.3 To Update on the Price Update Indicators Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Price Update Indicators -Drug information is saved.

6.43 Pricing-Drug Panel

6.43.1 Pricing-Drug Panel Narrative

The Pricing Drug panel is composed of four other panels: AWP, Federal MAC, State MAC and Other Rates.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug] - (Click on [Search] button) - (Select row from search results) - [Drug Maintenance] - [Drug] - [Pricing]

6.43.2 Pricing-Drug Panel Layout

AWP								Top Nav ? A ↕ X
AWUP	Status	Effective Date	End Date	EAC Price	EAC Percent	EAC Percent Effective Date	EAC Percent End Date	
A	\$999.00000	Active	01/01/2006	12/31/2299	\$999.00000	1	01/01/1900	12/31/2299
Type data below for new record.								
Average Wholesale Unit Price*		\$999.00000		Effective Date*		01/01/2006		
Status*		Active		End Date*		12/31/2299		
EAC Price		\$0.00		EAC Percent Effective Date		01/01/1900		
EAC Percent		1		EAC Percent End Date		12/31/2299		
								delete add

Federal MAC					Top Nav ? A ↕ X			
Federal MAC Price	Status	Effective Date	End Date					
A	\$999.00000	Inactive	01/01/2600	12/31/2299				
Type data below for new record.								
Federal MAC Price*		\$999.00000		Effective Date*		01/01/2600		
Status*		Inactive		End Date*		12/31/2299		
								delete add

State MAC					Top Nav ? A ↕ X			
State MAC Price	Status	Rate Type	Effective Date	End Date				
A	\$999.00000	Active	LEA	01/01/2600	12/31/2299			
Type data below for new record.								
State MAC Price*		\$999.00000		Effective Date*		01/01/2600		
Status*		Active		End Date*		12/31/2299		
Rate Type*		LEA						
								delete add

Other Rates					Top Nav ? A ↕ X			
Price Type	Price	Status	Effective Date	End Date				
A	\$0.00							
Type data below for new record.								
Price Type*		01 - Blue Book AWP Unit Price		Effective Date*		01/01/1900		
Price*		\$10.00000		End Date*		12/31/2269		
Status*		Active						
								delete add

6.43.3 Pricing-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
	AWP Rate Field Description			
Add	Allows the user to add AWP Rate information.	Button	N/A	0
Average Wholesale Unit Price	Blue Book average wholesale unit price. It represents the most common wholesaler price to the retailer or hospital. This price is based on actual surveys of drug wholesalers. Format \$9,999,999.99999.	Field	Number (Decimal)	12
Delete	Allows the user to remove AWP Rate information.	Button	N/A	0
EAC Percent	Actual percentage value to be applied to the estimated acquisition cost to determine reimbursement amount.	Field	Number (Decimal)	4
EAC Percent Effective Date	First date of service the associated percentage is effective.	Field	Date (MM/DD/CCYY)	8
EAC Percent End Date	Last date of service, or dispense date, this percentage is applicable.	Field	Date (MM/DD/CCYY)	8
EAC Price	Contains the price representing the Estimated Acquisition Cost. Format \$9,999,999.99999. EAC Price = (AWUP * EAC Percent)	Field	Number (Decimal)	12
Effective Date	The date that the average wholesale unit price takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	The date that the average wholesale unit price ends.	Field	Date (MM/DD/CCYY)	8
Status	This indicates whether the Average Wholesale Price segment is in an 'Active' or 'Inactive' status. Based upon date of process, only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0
	Federal MAC Rate Field Descriptions			
Add	Allows the user to add Federal MAC Rate information.	Button	N/A	0
Delete	Allows the user to remove Federal MAC Rate information.	Button	N/A	0
Effective Date	The date that the Federal MAC takes effect.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
End Date	The date that the Federal MAC ends.	Field	Date (MM/DD/CCYY)	8
Federal MAC Price	The Federal Maximum Allowable Cost (MAC) for a drug. The MAC is the unit price for a drug under Federal MAC regulation. Format \$9,999,999.99999	Field	Number (Decimal)	12
Status	This indicates whether the Federal MAC Price segment is in an 'Active' or 'Inactive' status. Based upon the date of process, only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down Lists Box	8
State MAC Rate Field Descriptions				
Add	Allows the user to add State MAC Rate information.	Button	N/A	0
Delete	Allows the user to remove State MAC Rate information.	Button	N/A	0
Effective Date	The date that the State MAC takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	The date that the State MAC no longer is in effect.	Field	Date (MM/DD/CCYY)	8
Rate Type	The Rate Type for this State MAC.	Combo Box	Drop Down List Box	0
State MAC Price	The Maximum Allowable Cost for a drug as determined by the State. Format \$9,999,999.99999.	Field	Number (Decimal)	12
Status	This indicates whether the State MAC Price segment is in an 'Active' or 'Inactive' status. Based upon date of process, only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0
Other Rates Field Descriptions				
Add	Allows the user to add Other Rate information.	Button	N/A	0
Delete	Allows the user to remove Other Rate information.	Button	N/A	0
Effective Date	First date of service the pricing segment is effective.	Field	Date (MM/DD/CCYY)	8
End Date	Last date of service the pricing segment is effective.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Price	Price amount for the relevant Price Type. Format is \$9,999,999.99999.	Field	Number (Decimal)	12
Price Type	FDB (First DataBank) Price Type code and description. Indicates the type of price for the relevant pricing segment.	Combo Box	Drop Down List Box	0
Status	This indicates whether the associated price segment is in an 'Active' or 'Inactive' status. Based upon date of process, only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0

6.43.4 Pricing-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Field edits for the AWP Rate-Drug panel can be found in section 5.20.4.				

Field	Field Type	Error Code	Error Message	To Correct
Field edits for the Federal MAC Rate -Drug panel can be found in section 5.27.4.				

Field	Field Type	Error Code	Error Message	To Correct
Field edits for the State MAC Rate-Drug panel can be found in section 5.38.4.				

Field	Field Type	Error Code	Error Message	To Correct
Field edits for the Other Rates-Drug panel can be found in section 5.33.4.				

6.43.5 Pricing-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.43.6 Pricing-Drug Panel Accessibility

6.43.6.1 To Access the Pricing-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	

Step	Action	Response
4	Click Search .	Search Results display.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Pricing .	Pricing -Drug panel displays. (AWP Rate, Federal MAC Rate, State MAC Rate and Other Rates panels display)

6.44 Reimbursement Rules-Drug Panel

6.44.1 Reimbursement Rules- Drug Panel Narrative

The Reimbursement Rules-Drug panel is used to view the Reimbursement Agreement information for a specific drug code. This information is retrieved from the Reimbursement Agreement tables available through the Benefit administration panels. The panel displays all reimbursement agreements associated with the specified Drug.

This panel is display only.

Navigation Path: [Reference] – [Drug] - [(select row from search results)] - [Reimbursement Rules]

6.44.2 Reimbursement Rules- Drug Panel Layout



Reimbursement Rules				
Restriction Choices				
Rule	Dispensed As Written	ALGI	Pricing Indicator	Rate Type
01/01/1900	i5279 1, 8	2	NDCBND	DEF
12/31/2299	i5280 1, 8	(2)	NDCLOW	DEF
	i5278 (1, 8)		NDCLOW	DEF

6.44.3 Reimbursement Rules- Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
ALGI	Indicates whether the drug is generic according to State defined criteria. 0 – Non-drug item 1 – Generic Product 2 – Brand Product.	Field	N/A	0
Dates	These are the effective and end dates for this rule.	Field	Date (MM/DD/CCYY)	8
Dispensed As Written	It provides the Dispensed as Written values that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included. Possible values are: 0 - No product selection indicated; 1 - Substitution not allowed by provider; 2 - Substitution allowed- patient requested product dispensed; 3 - Substitution allowed- pharmacist selected product dispensed; 4 - Substitution allowed- generic drug not in stock; 5 - Substitution allowed- brand drug dispensed as generic; 6 - Override; 7 - Substitution not allowed- brand drug mandated by law; 8 - Substitution allowed- generic drug not available in marketplace; 9 – Other.	Field	N/A	0
Pricing Indicator	Indicates if there is a pricing indicator selected for this rule.	Field	N/A	0

Field	Description	Field Type	Data Type	Length
Pricing Modifier	Pricing Modifier requirement for claims. Possible values are N - Pay Billed Amount, Y - Pay greater than Billed Amount & Z - Zero Pay Billed Amount.	Field	N/A	0
Rate Type	Indicates what type of Rate Type is selected for this rule. The Rate Type values are those found on the Codes-Rate Type panel.	Field	N/A	0
Rule	It provides the Rule identification.	Field	N/A	0

6.44.4 Reimbursement Rules- Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.44.5 Reimbursement Rules- Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.44.6 Reimbursement Rules- Drug Panel Accessibility

6.44.6.1 To Access the Reimbursement Rules-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Click Search .	Search Results display.
4	Select row.	Drug Information panel displays.
5	Click Reimbursement Rules .	Reimbursement Rules- Drug panel displays.

6.45 Restrictions Maintenance-Drug Panel

6.45.1 Restrictions Maintenance-Drug Panel Narrative

The Drug Restrictions Maintenance panel is used to update limits and restrictions for a specific NDC code. .

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug (Search)] - (click on [search] button) - (select row from search results) - [Drug Maintenance] - [Drug] - [Restrictions Maintenance]

6.45.2 Restrictions Maintenance-Drug Panel Layout

The screenshot shows the 'Restrictions Maintenance' window. At the top, there's a header bar with 'Top Nav ? A X'. Below it is a table with columns: Eff Date, End Date, Gender, Refill, Age From, Age To, Sup From, Sup To, Qty From, Qty To, OR Edit, MCare, LTC, Maint, Disp Fee, Financial Payer. The first row shows data for a drug with Effective Date 01/01/1900, End Date 12/31/2299, Gender S, Refill 0, Age From 0, Age To 999, Sup From 1, Sup To 34, Qty From 0.000, Qty To 9999999.999, OR Edit No, MCare No, LTC Either, Maint No, Disp Fee No, Financial Payer DEFAULT. Below the table is a form with fields for Effective Date*, End Date*, Gender, Refill, Age From, Age To, Days Supply From, Days Supply To, Quantity Supply From, Quantity Supply To, Override Day Supply Edit, Covered by Medicare, Long Term Care Coverage, Maintenance, Dispensing Fee, and Financial Payer*. The form also includes buttons for 'delete' and 'add'.

6.45.3 Restrictions Maintenance-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new Restriction to this drug.	Button	N/A	0
Age From	This is a number used to indicate the lower value in an age range. It is the minimum recipient age that is valid and is entered in number of years. This is an unused field/value for AL.	Field	Number (Integer)	4
Age To	This is a number used to indicate the upper value in an age range. It is the maximum recipient age that is valid and is entered in number of years. This is an unused field/value for AL.	Field	Number (Integer)	4
Covered by Medicare	Yes/No indicator used to identify drugs covered by Medicare. A 'N' (no) indicates the drugs is not covered by Medicare. This information comes from First DataBank. This is an unused field/value for AL.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Days Supply From	The minimum number of days a prescribed drug should last a Medicaid recipient from the date it is dispensed.	Field	Number (Integer)	4
Days Supply To	The maximum number of days a prescribed drug should last a Medicaid recipient from the date it is dispensed.	Field	Number (Integer)	4
Delete	Remove a Restriction from this drug.	Button	N/A	0
Dispensing Fee	Yes/No indicator used to identify drugs that should pay a percentage of the normally calculated dispensing fee. This indicator is used with the attribute NUM_DISP_FEE_PCT to determine the dispensing fee to pay. This is an unused field/value for AL.	Combo Box	Drop Down List Box	0
Effective Date	This is the date that the drug limitations take effect.	Field	Date (MM/DD/CCYY)	8
End Date	This is the date that the drug limitations no longer are in effect.	Field	Date (MM/DD/CCYY)	8
Financial Payer	The Financial Payer for the drug Restriction.	Combo Box	Drop Down List Box	0
Gender	Identifies the sex of a person that this drug is limited to. This is an unused field/value for AL.	Combo Box	Drop Down List Box	0
Long Term Care Coverage	Indicates whether the drug is covered if the recipient lives in a long term care facility. Valid values include: 'Either' (default value), 'Not in LTC', or 'Only in LTC'. This field is not utilized by Alabama.	Combo Box	Drop Down List Box	0
Maintenance	This indicates that the drug is required for maintaining health and as such provisions have been made to provide the drug in quantities greater than the standard 34-day or monthly supply. This is an unused field/value for AL.	Combo Box	Drop Down List Box	0
Override Day Supply Edit	Yes/No indicator used to identify drugs that are not edited for a 34 day supply. An indicator of Y (yes) I bypasses editing. This is an unused field/value for AL.	Combo Box	Drop Down List Box	0
Quantity Supply From	The minimum quantity of the drug which can be dispensed. The default value is 0.	Field	Number (Integer)	9

Field	Description	Field Type	Data Type	Length
Quantity Supply To	The maximum quantity of the drug which can be dispensed. The default value is 9999999.999.	Field	Number (Decimal)	10
Refill	The number of refills available for a specific prescribed drug.	Field	Character	2

6.45.4 Restrictions Maintenance-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Days Supply From	Field	1	Days Supply From must be less than or equal to Days Supply To.	Enter a Days Supply From that is less than or equal to Days Supply To.
	Field	2	Days Supply From must be less than or equal to 999.	Enter a Days Supply From that is less than or equal to 999.
	Field	3	Enter a valid value.	Verify a valid value has been entered.
Days Supply To	Field	1	Days Supply To must be greater than or equal to Days Supply From.	Enter a Days Supply To that is greater than or equal to Days Supply From.
	Field	2	Days Supply To must be less than or equal to 999.	Enter a Days Supply To that is less than or equal to 999.
	Field	3	Enter a valid value.	Verify a valid value has been entered.
Dispensing Fee	Field	1	Disp. Fee must be one of the following values: Y = Yes, N = No.	Select a value from the drop down.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Enter an Effective Date and End Date that do not overlap existing codes.
	Field	3	Invalid Date.	Enter an Effective Date that is numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective date that is greater than or equal to 01/01/1900.
	Field	5	Effective Date is required.	Enter a valid Effective Date.

Field	Field Type	Error Code	Error Message	To Correct
	Field	6	End Date must be less than or equal to 12/31/2299.	Verify keying. The date must be less than or equal to 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #]	Enter an Effective Date and End Date that do not overlap existing codes.
	Field	3	Invalid Date.	Enter an End Date that is numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	5	End Date is required.	Enter an End Date in MM/DD/CCYY format.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter and End Date that is less than or equal to 12/31/2299.
Financial Payer	Field	1	A valid Financial Payer is required.	Select a value from the drop down.
Quantity Supply From	Field	1	Quantity Supply From must be less than or equal to Quantity Supply To.	Enter a Quantity Supply From that is less than or equal to Quantity Supply To.
	Field	2	Quantity Supply From must be less than or equal to 999999.999.	Enter a Quantity Supply From that is less than or equal to 999999.999.
	Field	3	The field Quantity Supplied From has to be greater than or equal to 0.	Verify that the Quantity Supply From is greater than or equal to 0.
Quantity Supply To	Field	1	Quantity Supply From must be less than or equal to Quantity Supply To.	Enter a Quantity Supply To that is greater than or equal to Quantity Supply From.
	Field	2	Quantity Supply To must be less than or equal to 999999.999.	Enter a Quantity Supply To that is less than or equal to 999999.999.

6.45.5 Restrictions Maintenance-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.45.6 Restrictions Maintenance-Drug Panel Accessibility

6.45.6.1 To Access the Restrictions Maintenance-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click Restrictions Maintenance .	Restrictions Maintenance-Drug panel displays.

6.45.6.2 To Add on the Restrictions Maintenance-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Effective Date in MM/DD/CCYY format.	
3	Enter End Date in MM/DD/CCYY format.	
4	Select Gender from drop down list box.	
5	Enter Refill .	
6	Enter Age From .	
7	Enter Age To .	
8	Enter Days Supply From .	
9	Enter Days Supply To .	
10	Enter Quantity Supply From .	
11	Enter Quantity Supply To .	
12	Select Override Day Supply Edit from drop down list box.	
13	Select Covered by Medicare from drop down list box.	
14	Select Long Term Care Coverage from drop down list box.	
15	Select Maintenance from drop down list box.	
16	Select Dispensing Fee from drop down list box.	
17	Select Financial Payer from drop down list	

Step	Action	Response
	box.	
18	Click Save .	Restrictions Maintenance-Drug information is saved.

6.45.6.3 To Update on the Restrictions Maintenance-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Restrictions Maintenance-Drug information is saved.

6.45.6.4 To Delete on the Restrictions Maintenance-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.46 State MAC Rate-Drug Panel

6.46.1 State MAC Rate-Drug Panel Narrative

The State MAC Rate panel is used to maintain the State determined Maximum Allowable Cost (MAC) for a drug, along with its effective dates and status.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Drug (Search)] - (click on [search] button) - (select row from search results) - [Drug Maintenance] - [Drug] - [State MAC] or

Navigation Path: [Reference] - [Drug (Search)] - (click on [search] button) - (select row from search results) - [Drug Maintenance] - [Drug] - [Pricing] - (scroll to [State MAC])

6.46.2 State MAC Rate-Drug Panel Layout

The screenshot shows the 'State MAC Rate' panel. At the top is a table with columns: State MAC Price, Status, Rate Type, Effective Date, and End Date. The table contains several rows of data. Below the table is a form with fields for State MAC Price, Status (a dropdown), Rate Type (a dropdown), Effective Date, and End Date. There are 'delete' and 'add' buttons at the bottom right. A note at the bottom states: 'Note : Price Update Indicator is set to No'.

State MAC Price	Status	Rate Type	Effective Date	End Date
\$0.15375	Active	DEF	11/23/2008	12/31/2299
\$0.00000	Inactive	DEF	06/01/1998	10/16/1999
\$0.04810	Active	DEF	12/30/1997	05/31/1998
\$0.04360	Active	DEF	05/27/1997	12/29/1997
\$0.21810	Active	DEF	02/18/1997	05/26/1997
\$0.21160	Active	DEF	01/30/1996	02/17/1997
\$0.19520	Active	DEF	01/01/1996	01/29/1996

Select row above to update -or- click Add button below.

State MAC Price: Effective Date:
Status: End Date:
Rate Type:

Note : Price Update Indicator is set to No

6.46.3 State MAC Rate-Drug Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new State MAC pricing to this Drug.	Button	N/A	0
Delete	Remove a State MAC pricing from this Drug.	Button	N/A	0
Effective Date	This is the date that the State MAC takes effect.	Field	Date (MM/DD/CCYY)	8
End Date	This is the date that the State MAC is no longer be in effect.	Field	Date (MM/DD/CCYY)	8
Note	Indicates weather State MAC rate can be updated via Batch. Default value is 'Yes.'	Button	N/A	0
Rate Type	The Rate Type for this State MAC.	Combo Box	Drop Down List Box	0
State MAC Price	This is the Maximum Allowable Cost for a drug as determined by the State. Format \$9,999,999.99999.	Field	Number (Decimal)	12

Field	Description	Field Type	Data Type	Length
Status	Indicates whether the State MAC pricing segment is in an active or inactive status. Only active segments are used for pricing. Inactive segments are maintained for historical purposes.	Combo Box	Drop Down List Box	0

6.46.4 State MAC-Drug Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date[Field is required]	Field	1	Effective Date is required.	Enter an Effective Date in MM/DD/CCYY format.
	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Enter an Effective Date and End Date that do not overlap existing dates.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	8012	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.
	Field	91001	Invalid Date.	Enter a date in MM/DD/CCYY format.
End Date[Field is required]	Field	1	End Date is required.	Enter a date in MM/DD/CCYY format.
	Field	2	The fields Effective Date and End Date from row [row #] cannot overlap with row [row #].	Enter an Effective Date and End Date that do not overlap existing dates.
	Field	3	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	8012	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to Effective Date.

Field	Field Type	Error Code	Error Message	To Correct
	Field	91001	Invalid Date.	Enter a date in MM/DD/CCYY format.
Rate Type	Field	1	A valid Rate Type is required.	Select a Rate Type.
State MAC Price	Field	1	State MAC Price must be less than or equal to \$9,999,999.99999.	Enter a Price is that is less than or equal to \$9,999,999.99999.
	Field	2	State MAC Price is required.	Enter a State Maximum Allowable Cost price.
Status	Field	1	Status is required.	Select a value for Status.

6.46.5 State MAC Rate-Drug Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.46.6 State MAC Rate-Drug Panel Accessibility

6.46.6.1 To Access the State MAC Rate-Drug Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Drug .	Reference Drug Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Drug Search Results panel displays.
5	Select row from list of results.	Drug Maintenance and Information panels display.
6	Click State MAC Rate .	State MAC Rate-Drug panel displays.

6.46.6.2 To Add on the State MAC Rate-Drug Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter State MAC Price .	
3	Select Status from drop down list box.	
4	Select Rate Type from drop down list box.	
5	Enter Effective Date in MM/DD/CCYY	

Step	Action	Response
	format.	
6	Enter End Date in MM/DD/CCYY format.	
7	Click Save .	State MAC Rate-Drug information is saved.

6.46.6.3 To Update on the State MAC-Drug Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	State MAC Rate-Drug information is saved.

6.46.6.4 To Delete on the State MAC-Drug Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.47 Reference Error Disposition Search-Error Disposition Panel

6.47.1 Reference Error Disposition Search-Error Disposition Panel Narrative

The Reference Error Disposition Search panel allows the user to enter search criteria and query for Error Disposition Codes whose data matches those criteria.

Navigation Path: [Reference] – [Error Disposition]

6.47.2 Reference Error Disposition Search-Error Disposition Panel Layout

6.47.3 Reference Error Disposition Search-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Opens up the appropriate panels necessary to create a new Edit or Audit.	Button	N/A	0
Clear	Clears the search criteria fields (Error Code, Description).	Button	N/A	0
Description	Description that is used by the search function to pull back the edit(s) and/or audit(s) that contain this description anywhere in their description.	Field	Character	50
Error Code	Code used to identify an edit or audit that is used by the search function to pull back its related data.	Field	Number (Integer)	4
Match Criteria	Specifies whether to search for matches that begin with or contain the user-entered value of the Description field.	Radio Button	N/A	0
Records	Maximum number of records that is displayed per page, based on the total number of records returned that match the search criteria.	Combo Box	Drop Down List Box	0
Search	Initiates search on the database for a record matching the search criteria keyed-in. The search performs a %like% search on the description field and an exact match search on the error code field.	Button	N/A	0

6.47.4 Reference Error Disposition Search-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found.	Check the input.
	Field	2	No rows found.	Check the input.

6.47.5 Reference Error Disposition Search-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.47.6 Reference Error Disposition Search-Error Disposition Panel Accessibility

6.47.6.1 To Access the Reference Error Disposition Search-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search-Error Disposition panel displays.

6.48 Reference Error Disposition Search Results Panel

6.48.1 Reference Error Disposition Search Results Panel Narrative

The Reference Error Disposition Results panel displays Error Codes matching the selection criteria from the Error Disposition Search panel.

This panel is inquiry only.

Navigation Path: [Reference] – [Error Disposition] - [(enter search criteria, or click on 'search' button)]

6.48.2 Reference Error Disposition Search Results Panel Layout

Search Results				
Error Code	Error Description	Header Detail Indicator	Overridable	Spenddown Pre-emptive
201	BILLING PROVIDER ID NUMBER MISSING	Header	No	Yes
202	BILLING PROVIDER ID IN INVALID FORMAT	Header	No	Yes
203	RECIPIENT I.D. NUMBER MISSING	Header	No	Yes
205	PRESCRIBING PRACTITIONER'S LICENSE NO. MISSING	Header	No	
206	PRESCRIBING PRACTITIONER LICENSE NO. FORMAT INVALID	Header	No	
208	PREGNANCY INDICATOR INVALID	Detail	No	
209	FACILITY PROVIDER SERVICE LOCATION IS MISSING	Header	No	No
210	BRAND MEDICALLY NECESSARY INDICATOR INVALID	Header	No	
211	REFILL INDICATOR INVALID	Header	No	Yes
212	PRESCRIPTION NUMBER IS MISSING	Header	No	Yes
213	DATE PRESCRIBED IS MISSING	Header	No	
214	DATE PRESCRIBED IS INVALID	Header	No	
215	DATE DISPENSED IS MISSING	Header	No	
216	DATE DISPENSED IS INVALID	Header	No	No
217	NDC MISSING	Detail	No	Yes
218	NDC INVALID FORMAT	Detail	No	Yes
219	QUANTITY DISPENSED IS MISSING	Detail	No	Yes
220	QUANTITY DISPENSED IS INVALID	Detail	No	Yes
221	DAYS SUPPLY MISSING	Header	No	Yes
222	DAYS SUPPLY INVALID	Header	No	

1 2 3 4 5 6 7 8 9 10 ... Next >

6.48.3 Reference Error Disposition Search Results Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Error Code	Code used to indicate an error was discovered on a claim during processing in the MMIS system. This can be either an edit or an audit.	Field	Number (Integer)	4
Error Description	Description of an edit or an audit.	Field	Character	50
Header Detail Indicator	Indicates whether edit or audit should be set on the header.	Field	Character	1
Overridable	Indicates (Y/N) whether a clerk should be allowed to override an edit/audit upon review of the claim.	Field	Character	1
Spenddown Pre-emptive	Indicates whether the claim should be counted against spenddown if the edit is set. If the indicator is set to 'Yes' and the edit is set on the claim, the claim billed amount is not considered in Recipient spenddown.	Field	Character	1

6.48.4 Reference Error Disposition Search Results Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.48.5 Reference Error Disposition Search Results Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.48.6 Reference Error Disposition Search Results Panel Accessibility

6.48.6.1 To Access the Reference Error Disposition Search Results Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Enter search criteria. Note: User may also click Search without entering search criteria. This displays a list of rows to select from.	Reference Error Disposition Search Results panel displays.

6.49 Error Disposition Information-Error Disposition Panel

6.49.1 Error Disposition Information-Error Disposition Panel Narrative

The Error Disposition Information panel contains summary information about error disposition.

This panel is display only.

Navigation Path: [Reference] - [Error Disposition Search] - (click on 'search' and select row from search results)] - [Error Disposition Information]

6.49.2 Error Disposition Information-Error Disposition Panel Layout

NextSearch By Error Code

Error Disposition Information

Error Code	201	Description	BILLING PROVIDER ID NUMBER MISSING
Header/Detail	Header	Disposition Criteria Detail	0 ALL F 00 000 01/01/1900 01/01/1900 A 18
Allow Override	Yes		
Allow Denial	Yes		
Allow Claim Correction Form	No		
Edit Critical	No		
Cost Containment	No		
Spenddown Pre-emptive	No		
Claim Check Pre-emptive	No		
Potential History to Adjust Report	No		
Claim Check/Claim Review Savings Report	No	Audit Type	BL BENEFIT LIMITS
Force Manual Price	No		

6.49.3 Error Disposition Information-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Allow Claim Correction Form	Indicates (Yes or No) whether a claim correction form can be generated for the specific error code.	Field	Character	1
Allow Denial	Indicates (Yes or No) whether a clerk should be allowed to set the edit/audit to deny upon review of the claim.	Field	Character	1
Allow Override	Indicates (Yes or No) whether a clerk should be allowed to override an edit/audit upon review of the claim.	Field	Character	1
Audit Type	Identifies the type of audit (i.e. limitation, conflict, negative contra, contra-indicated, step therapy, or umbrella).	Combo Box	Drop Down List Box	0
Claim Check Pre-emptive	Indicates whether Claim Check should be bypassed if the edit is set on a claim. If the indicator is set to 'Yes' and the edit is set on the claim, the claim will not go through Claim Check processing.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Claim Check/Claim Review Savings Report	Indicates if the error should be reported on the Potential History To Adjust Report.	Field	Character	1
Cost Containment	Indicates whether the error status code is a cost containment item.	Field	Character	1
Description	Description of an edit or an audit.	Field	Character	50
Disposition Criteria Detail	This provides a list view of various Error Disp Line items associated with the Error Code.	Listview	N/A	0
Edit Critical	Indicator identifying if the ESC is considered critical, and should not be inactivated, or set to pay (forced) by a clerk.	Field	Character	1
Error Code	Code used to indicate an error was discovered on a claim during processing in the MMIS system. This code can represent either an edit or an audit.	Field	Number (Integer)	4
Force Manual Price	This is used to override Edit Critical (IND_CRITICAL) when = 'Y'. A 'Y' in this column means this ESC may be forced (set to pay) if the service is priced manually.	Field	Character	1
Header/Detail	Indicates whether edit or audit should be set on the header - 'H', or detail - 'D' level of a claim.	Field	Character	1
Potential History to Adjust Report	Indicates if the error should be reported on the Potential History To Adjust Report. If the box is checked, the error is included in the report.	Field	Character	1
Spenddown Pre-emptive	Indicates whether the claim should be counted against spenddown if the edit is set. If the indicator is set to 'Yes' and the edit is set on the claim, the claim billed amount is not considered in Recipient spenddown calculations.	Field	Charater	1

6.49.4 Error Disposition Information-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.49.5 Error Disposition Information-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.49.6 Error Disposition Information-Error Disposition Panel Accessibility

6.49.6.1 To Access the Error Disposition Information-Error Disposition Panel Accessibility

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Search .	Reference Error Disposition Search Results panel displays.
4	Select row from data list.	Error Disposition Information-Error Disposition panel displays.

6.50 Error Disposition Maintenance-Error Disposition Panel

6.50.1 Error Disposition Maintenance-Error Disposition Panel Narrative

The Error Disposition Maintenance panel is used to maintain Reference Error Disposition data.

This panel is inquiry only.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance]

6.50.2 Error Disposition Maintenance-Error Disposition Panel Layout

The Error Disposition Maintenance panel layout consists of three main sections. The first section, titled 'Error Disposition Maintenance', shows a tree view on the left with 'Error Disposition' selected. The main area, titled 'Select an area to add or modify', contains a grid of links: 'Adjustment/Data Correction EOB', 'Modification Log', 'Resolution Clarification', 'Resolution Medical Policy', 'Resolution Status', 'Base Information', 'NCPDP Response', 'Resolution Criteria', 'Resolution Method of Correction', 'Disposition Criteria Parameters', 'Resolution Group', and 'Resolution Note'. The second section, titled 'Error Disposition Maintenance', shows the 'Audit Criteria' sub-panel. The main area, titled 'Select an area to add or modify', contains links for 'Audit Criteria Base', 'Audit Parameters', and 'Step Therapy'. The third section, titled 'Error Disposition Maintenance', shows the 'Audit Restriction' sub-panel. The main area, titled 'Select an area to add or modify', contains links for 'Age', 'Diagnosis', 'GPI', 'POS', 'Provider Type', 'Therapeutic Class', 'AHFS Class', 'Financial Payer', 'HICL', 'Procedure', 'Recipient Plan', 'Tooth Number', 'Claim Type', 'GCN Sequence', 'NDC', 'Provider Specialty', 'Revenue Code', and 'Type of Bill'. Each section includes 'save', 'cancel', and 'new' buttons at the bottom left and navigation controls at the top right.

6.50.3 Error Disposition Maintenance-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adjustment/Data Correction EOB	Link to the panel containing 'Explanation of Benefits' information, associated with the Error that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Age	Link to the panel containing 'Age Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Age' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
AHFS Class	Link to the panel containing 'AHFS Class' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'AHFS Class' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Audit Criteria	This is a 'child' element under the 'tree' on the left hand side of the panel. When this is highlighted, the navigator panel on the right hand side panel contains links to sub panels under 'Audit Criteria' for the Error Disp that is open on page.	Treeview	N/A	0
Audit Criteria Base	Link to the panel containing detail information of the Audit Criteria for the Error Disposition that is open on page. This link item is available when 'Audit Criteria' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition")	Hyperlink	N/A	0
Audit Parameters	Link to the panel containing detail Audit Parameter information of the Audit Criteria for the Error Disposition that is open on page. Parameter Panel type depends upon the type of Audit. For example, for a limitation audit, it opens up Limit Parameter panel while for Contra Audit, it opens Contra Parameter panel. This link item is available when 'Audit Criteria' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition").	Hyperlink	N/A	0
Audit Restriction	This is a 'child' element under the 'tree' on the left hand side of the panel. When this is highlighted, the navigation panel on the right hand side panel contains links to sub panels under 'Audit Restrictions' for the Error Disp that is open on page.	Treeview	N/A	0
Base Information	Link to the panel containing Detail information of the Error that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Cancel	Cancels all changes to any panel in the navigation panel links.	Button	N/A	0
Claim Type	Link to the panel containing 'Claim Type Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Claim Type' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Diagnosis	Link to the panel containing 'Diagnosis Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Diagnosis' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Disposition Criteria	Link to the panel containing Line Item information of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Error Disposition	This is the 'root' element of the 'tree' on the left hand side of the panel. When this is highlighted, the navigation panel on the right hand side panel contains links to sub panels under 'Error Disposition.	Treeview	N/A	0
Financial Payer	Link to the panel containing 'Payer Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Financial Payer' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
GCN Sequence	Link to the panel containing 'GCN Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'GCN' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
GPI	Link to the panel containing 'GPI Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'GPI' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
HICL	Link to the panel containing 'HICL' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'HICL' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Modification Log	Link to the panel containing 'clerical notes' information for the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
NCPDP Response	Link to the panel containing NCPDP Response information of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
NDC	Link to the panel containing 'NDC Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'NDC' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Parameters	Link to the panel containing 'edit parameter' information for the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Procedure	Link to the panel containing 'Procedure Restriction' information (Contra for a 'contra audit') of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Procedure' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
POS	This provides a link to the panel containing 'POS'. The State and EDS use the Limit Audit POS Limitations panel to update places of service restrictions which are applicable to the error code. For example, if a limit audit applies only to services provided in the hospital, then the hospital place of service value would be entered, and displayed.	Hyperlink	N/A	0
Provider Specialty	Link to the panel containing 'Provider Specialty Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Provider Specialty' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Provider Type	Link to the panel containing 'Provider Type Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Provider Type' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Recipient Plan	Link to the panel containing 'Recipient Plan Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if Recipient Plan is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Resolution Clarification	Link to the panel containing Resolution Clarifications for the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Resolution Criteria	Link to the panel containing Resolution Criteria information for the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Resolution Group	Link to the panel containing Resolution Group information for the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Resolution Medical Policy	Link to the panel containing Medical Policy information for Resolution of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Resolution Method of Correction	Link to the panel containing Method of Correction information for Resolution of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Resolution Note	Link to the panel containing 'Notes' about Resolution of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Resolution Status	Link to the panel containing 'status' information about Resolution of the Error Disposition that is open on page. This link item is available when 'Error Disposition' is selected on the left hand side tree view.	Hyperlink	N/A	0
Revenue Code	Link to the panel containing 'Revenue Code Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Revenue Code' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Save	Saves all changes to any panel in the navigation panel links to the database.	Button	N/A	0
Step Therapy	Link to the panel containing Step Therapy information of the Audit for the Error Disposition that is open on page. This link item is available for a 'Step Therapy' type of audit, when 'Audit Criteria' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition")	Hyperlink	N/A	0
Therapeutic Class	Link to the panel containing 'Therapeutic Class Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Therapeutic Class' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Tooth Number	Link to the panel containing 'Tooth Number Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Tooth Number' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0
Type of Bill	Link to the panel containing 'Type of Bill Restriction' information of the Audit for the Error Disposition that is open on page. This link item is available when 'Audit Restriction' is selected on the left hand side tree view. (by clicking on the '+' sign next to "Error Disposition"). The link is 'grayed' out if 'Type of Bill' is 'not included' in the Audit Criteria.	Hyperlink	N/A	0

6.50.4 Error Disposition Maintenance-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.50.5 Error Disposition Maintenance-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.50.6 Error Disposition Maintenance-Error Disposition Panel Accessibility

6.50.6.1 To Access the Disposition Maintenance-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Search .	Reference Error Disposition Search Results panel displays.
4	Select row from data list.	Error Disposition Maintenance-Error Disposition panel displays.

6.50.6.2 To Navigate the Error Disposition Maintenance-Error Disposition Panel

Step	Action	Response
1	Select an area to add or modify by clicking desired hyperlink	Selected Error Disposition panel displays.

6.51 Error Disposition Mini Search-Error Disposition Panel


6.51.1 Error Disposition Mini Search-Error Disposition Panel Narrative

The Error Disposition Mini-Search panel provides the user with the ability to search for an Error Code from the Error Disposition Information panel.

This panel is inquiry only.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)]

6.51.2 Error Disposition Mini Search-Error Disposition Panel Layout



6.51.3 Error Disposition Mini Search-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	This takes the user to Error Disposition main search page where user can set more advanced search criteria.	Button	N/A	0
Clear	Clears the 'Error Code' field so user may key in a new Error Code to search for.	Button	N/A	0
Error Code	Code used to identify an edit or audit, used as search criteria.	Field	Number (Integer)	4
Search	Initiates database search for an Error record matching the Error Code keyed-in. If a record is found, the page is refreshed with the detail information of the Error Code keyed-in.	Button	N/A	0

6.51.4 Error Disposition Mini Search-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.51.5 Error Disposition Mini Search-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.51.6 Error Disposition Mini Search-Error Disposition Panel Accessibility

6.51.6.1 To Access the Error Disposition-Mini Search-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Error Disposition Mini Search panel displays.

6.51.6.2 To Navigate the Disposition-Mini Search-Error Disposition Panel

Step	Action	Response
1	Enter Error Code .	
2	Click Search .	Error Disposition Information and Maintenance panels display.

6.52 Adjustment Data Correction EOB-Error Disposition Panel

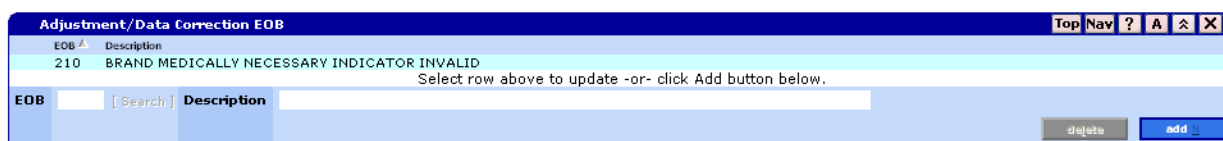
6.52.1 Adjustment Data Correction EOB-Error Disposition Panel Narrative

The Adjustment Data Correction EOB panel contains the EOB (Explanation of Benefit) code assigned to a claim header/detail for each ESC (Error Status Code) that may be posted as a result of an edit or audit. This EOB represents a meaningful message for the provider.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition Search] - [select search] -[select row from search results] - [Error Disposition Maintenance] - [Error Disposition] - [Adjustment/Data Correction EOB]

6.52.2 Adjustment Data Correction EOB-Error Disposition Panel Layout



6.52.3 Adjustment Data Correction EOB-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add an EOB assignment for the Error Status Code.	Button	N/A	0
Delete	Allows the user to delete an EOB from the Error Status Code.	Button	N/A	0
Description	Description for the Explanation of Benefits (EOB) that is printed on the remittance advice.	Field	Character	79
EOB [Search]	Code which represents a policy for Medicaid claim adjudication.	Hyperlink	N/A	0

6.52.4 Adjustment Data Correction EOB-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
EOB	Hyperlink	1	A valid EOB is required.	Enter a valid EOB code or search for an EOB Code.

6.52.5 Adjustment Data Correction EOB-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.52.6 Adjustment Data Correction EOB-Error Disposition Panel Accessibility

6.52.6.1 To Access the Adjustment Data Correction EOB Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Adjustment /Data Correction EOB .	Adjustment Data Correction EOB Error Disposition panel displays.

6.52.6.2 To Add on the Adjustment Data Correction EOB-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select EOB by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	EOB Code and description is displayed on panel.
4	Click Save .	Adjustment Data Correction EOB Error Disposition information is saved.

6.52.6.3 To Update on the Adjustment Data Correction EOB-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Adjustment Data Correction EOB Error Disposition information is saved.

6.52.6.4 To Delete on the Adjustment Data Correction EOB-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.53 Base Information-Error Disposition Panel

6.53.1 Base Information-Error Disposition Panel Narrative

The Base Information panel is used to view, add or update whether an edit or audit sets at the detail or header level, whether the resolutions clerk can deny or override the claim if it suspends, and to what location the claim is set for dispositioning.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition] - [Error Disposition Search] - [(Add button) OR [click on 'search' button, select row from search results] - [Error Disposition Maintenance] - [Error Disposition] - [Base Information]

6.53.2 Base Information-Error Disposition Panel Layout

The screenshot shows a web-based form titled "Base Information". It has a blue header bar with "Top Nav ? A X" on the right. The form is divided into two main sections. The left section contains fields: "Error Code*" with value "203", "Description*" with value "RECIPIENT I.D. NUMBER MISSING", "Header/Detail*" with a dropdown set to "Header", "Allow Override*" with a dropdown set to "No", "Allow Denial*" with a dropdown set to "Yes", "Allow Claim Correction Form*" with a dropdown set to "No", and "Force Manual Price*" with a dropdown set to "No". The right section contains: "Cost Containment*" with a dropdown set to "No", "Spenddown Pre-emptive*" with a dropdown set to "Yes", "Claim Check Pre-emptive*" with a dropdown set to "Yes", "Potential History to Adjust Report*" with a dropdown set to "No", "Claim Check/Claim Review Savings Report*" with a dropdown set to "No", and "Edit Critical" with a dropdown set to "Yes". A "delete" button is located at the bottom right of the form.

6.53.3 Base Information-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Allow Claim Correction Form	Indicates (Yes or No) whether a claim correction form can be generated for the specific error code.	Combo Box	Drop Down List Box	0
Allow Denial	Indicates (Yes or No) whether a clerk should be allowed to set the edit/audit to deny upon review of the claim.	Combo Box	Drop Down List Box	0
Allow Override	Indicates (Yes or No) whether a clerk should be allowed to override an edit/audit upon review of the claim.	Combo Box	Drop Down List Box	0
Claim Check Pre-emptive	Indicates whether Claim Check should be bypassed if the edit is set on a claim. If the indicator is set to "Yes" and the edit is set on the claim, the claim will not go through Claim Check processing. This field is not used in AL, and therefore the value needs to be left at 'No'.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Claim Check/Claim Review Savings Report	Indicates if the error should be reported on the Claim Check/Claim Review Savings Report. If the box is checked, the error is included in the report. This field is not used in AL, and therefore the value needs to be left at 'No'.	Combo Box	Drop Down List Box	0
Cost Containment	Indicates whether the error status code is a cost containment item.	Combo Box	Drop Down List Box	0
Delete	Allows the user to remove the Error Code from interChange database.	Button	N/A	0
Description	Description of the edit or audit.	Field	Character	50
Edit Critical	Indicator identifying if the ESC is considered critical, and should not be inactivated, or set to pay (forced) by a clerk.	Combo Box	Drop Down List Box	0
Error Code	Code used to indicate an error was discovered on a claim during processing in the MMIS system. This code can represent either an edit or an audit.	Field	Number (Integer)	4
Force Manual Price	This is used to override Edit Critical (IND_CRITICAL) when = "Y". A 'Y' in this column means this ESC may be forced (set to pay) if the service is priced manually.	Combo Box	Drop Down List Box	0
Header/Detail	Indicates whether edit or audit should be set on the header - 'H', or detail - 'D' level of a claim.	Combo Box	Drop Down List Box	0
Potential History to Adjust Report	Indicates if the error should be reported on the Potential History To Adjust Report. If the box is checked, the error is included in the report.	Combo Box	Drop Down List Box	0
Spenddown Pre-emptive	Indicates whether the claim should be counted against spenddown if the edit is set. If the indicator is set to "Yes" and the edit is set on the claim, the claim billed amount is considered in Recipient spenddown calculations. This field is not used in AL, and therefore the value needs to be left at 'No'.	Combo Box	Drop Down List Box	0

6.53.4 Base Information-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	Error Description is required.	Enter Description.
Error Code	Field	1	Error Code is required.	Enter a 'NUMERIC' Error Code.
	Field	2	Error Code must be less than or equal to 9999.	Enter a value that is less than or equal to 9999.
Force Manual Price	Field	1	Force Manual Price Indicator can only be set if Critical Indicator is 'Y'.	Insert 'Y' only if the Critical field is 'Y'.

6.53.5 Base Information-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.53.6 Base Information-Error Disposition Panel Accessibility

6.53.6.1 To Access the Base Information-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Base Information .	Base Information Error Disposition panel displays.

6.53.6.2 To Add on the Base Information-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Error Code .	
3	Enter Description .	
4	Select Header/Detail from drop down list box.	
5	Select Allow Override from drop down list box.	
6	Select Allow Denial from drop down list	

Step	Action	Response
	box.	
7	Select Allow Claim Correction Form from drop down list box.	
8	Select Force Manual Price from drop down list box.	
9	Select Cost Containment from drop down list box.	
10	Select Spenddown Pre-emptive from drop down list box. This field is not used in AL, and therefore the value needs to be left at 'No'.	
11	Select Claim Check Pre-emptive from drop down list box. This field is not used in AL, and therefore the value needs to be left at 'No'.	
12	Select Potential History to Adjust Report from drop down list box.	
13	Select Claim Check/Claim Review Savings Report from drop down list box. This field is not used in AL, and therefore the value needs to be left at 'No'.	
14	Select Edit Critical from drop down list box.	
15	Click Save .	Base Information Error Disposition information is saved.

6.53.6.3 To Update on the Base Information-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information Error Disposition information is saved.

6.53.6.4 To Delete on the Base Information-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.54 Disposition Criteria-Error Disposition Panel

6.54.1 Disposition Criteria-Error Disposition Panel Narrative

The Disposition Criteria panel contains detail dispositioning information concerning a specific edit/audit. The correct disposition detail to use for a claim is determined based on the claim type, level of care, outcome (full failure or cutback), provider specialty, date of receipt, and date of service of the claim. If there is not an exact match on claim type or provider specialty, the defaults of 0 and 00 are used. Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Disposition Criteria]

6.54.2 Disposition Criteria-Error Disposition Panel Layout

The screenshot displays the 'Disposition Criteria' panel. At the top is a table with columns: Claim Type, Recipient Plan, Disposition Status, Outcome Code, Claim Location, Financial Payer, Provider Type, Provider Specialty, Effective DOR, Effective DOS, and Disposition Rule Used. The table contains 7 rows of data. Below the table is a text prompt: 'Select row above to update -or- click Add button below.' Underneath this is a form with two columns of fields. The left column includes: Claim Type (dropdown), Recipient Plan (dropdown), Claim Location (dropdown), Disposition Status (dropdown with 'Active' selected), Outcome Code (dropdown), and Financial Payer (dropdown with 'test' selected). The right column includes: Provider Type (dropdown with '[Search]' button), Provider Specialty (dropdown with '[Search]' button), Print Type (dropdown), Print on RA (dropdown), Effective DOR (text field), and Effective DOS (text field). At the bottom right of the form are 'Delete' and 'Add' buttons.

6.54.3 Disposition Criteria-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new 'Disposition Criteria' to the Edit/Audit.	Button	N/A	0
Claim Location	Type of location in which a claim can be placed during processing in the MMIS system.	Combo Box	Drop Down List Box	0
Claim Type	Type of claim assigned to specified error criteria used for disposition of the claim.	Combo Box	Drop Down List Box	0
Delete	Allows the user to mark a Disposition Criteria to be removed from the edit/audit.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
Disposition Rule Used	Shows the specific error disposition line number, indicated by a system assigned key used to define an occurrence of an error disposition for a specific edit/audit. The line number is retrieved from t_err_disp_line.sak_error_disp.	Field	N/A	0
Disposition Status	Indicates if a line item criterion are active or inactive. On the Region Data sub panel it relates to the code that represents the action (pay, deny, suspend,super suspend, Pay and List) that should be taken on a claim at dispositioning time.	Combo Box	Drop Down List Box	0
Effective DOR	Date claim processes in the system (date of receipt) for which the error should be set.	Field	Date (MM/DD/CCYY)	8
Effective DOS	Date of service for which the error should be set.	Field	Date (MM/DD/CCYY)	8
Financial Payer	The Financial payer generally represents a unique organization responsible for the underwriting of the claims transactions to be paid.	Combo Box	Drop Down List Box	0
Outcome Code	Indicates how to handle the possible types of failure of an edit or audit (full failure or cutback).	Combo Box	Drop Down List Box	0
Print on RA	Indicates if the error should be posted on the Remittance Advice.	Combo Box	Drop Down List Box	0
Print Type	Indicates if details that fail this edit/audit should produce a paper worksheet or appear on the edit list report.	Combo Box	Drop Down List Box	0
Provider Specialty [Search]	Specific error handling based on the specialty of the provider (billing or rendering depending on claim type). A value of "000" is used to designate any specialty.	Hyperlink	N/A	0
Provider Type [Search]	Type that a provider is licensed for. A value of "000" is used to designate any specialty.	Hyperlink	N/A	0
Recipient Plan	Code that identifies the recipient plans that are supported by the system.	Combo Box	Drop Down List Box	0

6.54.4 Disposition Criteria-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Claim Location	Field	1	A valid Claim Location is required.	Select a 'Claim Location' from the drop down list.
	Field	2	A valid Region Disp is required.	Region Disp has to have a value.
	Field	3	Must contain at least one Region Disp.	Enter a valid Region Disposition.
Claim Type	Field	1	A valid Claim Type is required.	Enter a Claim Type.
	Field	2	Must contain at least one Region Disp.	A valid Region Disp must be added.
Effective DOR	Field	1	Must contain Effective DOR Date or Effective DOS Date.	Enter an Effective DOR.
	Field	2	Invalid date.	Enter an Effective DOR that is numeric and in MM/DD/CCYY format.
	Field	3	Effective DOR must be greater than or equal to 01/01/1900.	Enter an Effective DOR that is greater than or equal to 01/01/1900.
	Field	4	Effective DOR date must be less than or equal to 12/31/2299.	Enter an Effective DOR that is less than or equal to 12/31/2299.
Effective DOS	Field	1	Must contain Effective DOR Date or Effective DOS Date.	Enter an Effective DOS.
	Field	2	Invalid date	Enter an Effective DOS that is numeric and in MM/DD/CCYY format.
	Field	3	Effective DOS must be greater than or equal to 01/01/1900.	Enter an Effective DOS that is greater than or equal to 01/01/1900.
	Field	4	Effective DOS must be less than or equal to 12/31/2299.	Enter a date that is less than or equal to 12/31/2299.
Outcome Code	Field	1	Outcome Code is required.	Select a value from the drop down list.
Print Type	Field	1	Print Type is required.	Select a 'Print Type' from the drop down list.
Print on RA	Field	1	Print on RA is required.	Select a value from the drop down list.
Recipient Plan	Field	1	A valid Recipient Plan is required.	Select a Recipient Plan from the drop down list.

6.54.5 Disposition Criteria-Error Disposition Panel Extra Features

Field	Field Type
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Field	Field Type
No extra features found for this page/panel.	

6.54.6 Disposition Criteria-Error Disposition Panel Accessibility

6.54.6.1 To Access the Disposition Criteria- Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Disposition Criteria .	Disposition Criteria- Error Disposition panel displays.

6.54.6.2 To Add on the Disposition Criteria- Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Claim Type from the drop down list box.	
3	Select Recipient Plan from the drop down list box.	
4	Select Claim Location from drop down list box.	
5	Select Disposition Status from drop down list box.	
6	Select Outcome Code from drop down list box.	
7	Select Financial Payer from drop down list box.	
8	Enter Provider Type . Click [Search] if unknown.	
10	Enter Provider Specialty . Click [Search] if unknown.	
11	Select Print Type from the drop down list box.	
12	Select Print on RA from drop down list box.	
13	Enter Effective DOR in MM/DD/CCYY format.	

Step	Action	Response
14	Enter Effective DOS in MM/DD/CCYY format.	
15	Click Save .	Disposition Criteria- Error Disposition information is saved.

6.54.6.3 To Update on the Disposition Criteria-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Disposition Criteria-Error Disposition information is saved.

6.54.6.4 To Delete on the Disposition Criteria-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.55 Disposition Criteria-Region Data-Error Disposition Panel

6.55.1 Disposition Criteria-Region Data-Error Disposition Panel Narrative

The Disposition Criteria - Region Data panel is used to add or update the Region Number and Disposition Status for a specific error code, Error Disposition Line Item.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Disposition Criteria (select row from the data list)]

6.55.2 Disposition Criteria-Region Data-Error Disposition Panel Layout

--Region Data-- Type changes below.

Region	EOB	Financial Payer	Disposition Status
00 - ALL CLAIM REGIONS	0623	ALL plans	D - DENIED
10 - PAPER CLAIMS WITH NO ATTACHMENTS	0623	ALL plans	S - SUSPENDED
11 - PAPER CLAIMS WITH ATTACHMENTS	0623	ALL plans	S - SUSPENDED
50 - ADJUSTMENTS - NON-CHECK RELATED	0623	ALL plans	S - SUSPENDED
51 - ADJUSTMENTS - CHECK RELATED	0623	ALL plans	S - SUSPENDED
52 - MASS ADJUSTMENTS - NON-CHECK RELATED	0623	ALL plans	S - SUSPENDED
53 - MASS ADJUSTMENTS - CHECK RELATED	0623	ALL plans	S - SUSPENDED
54 - MASS ADJUSTMENTS - VOID TRANSACTION	0623	ALL plans	S - SUSPENDED
55 - MASS ADJUSTMENTS - PROVIDER RATES	0623	ALL plans	S - SUSPENDED
56 - ADJUSTMENTS - VOID NON-CHECK RELATED	0623	ALL plans	S - SUSPENDED

1 2 Next >

Region
 Disposition Status
 Description

10 - PAPER CLAIMS WITH NO ATTACHMENTS
 S - SUSPENDED
 TPL PAID AMOUNT NOT NUMERIC

Financial Payer
 EOB

ALL ALL plans
 0623

delete add

6.55.3 Disposition Criteria-Region Data-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add new 'Region' data to the Error Disposition line item.	Button	N/A	0
Delete	Allows the user to mark a 'Region' to be removed from the line item.	Button	N/A	0
Description	Read-only description of the specific Explanation Of Benefit for a Region and a Payer assigned to the audit for dispositioning.	Field	Character	70
Disposition Status	Code that represents the action (pay, deny, suspend, super suspend, Pay and List) that should be taken on a claim at dispositioning time.	Combo Box	Drop Down List Box	0
EOB [Search]	Specific Explanation Of Benefit for a Region and a Payer assigned to the audit for dispositioning.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Financial Payer	The Financial payer generally represents a unique organization responsible for the underwriting of the claims transactions to be paid.	Combo Box	Drop Down List Box	0
Region	Specific region assigned to the edit or audit line item for dispositioning.	Combo Box	Drop Down List Box	0

6.55.4 Disposition Criteria-Region Data-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Disposition Status	Field	1	A valid Disposition Status is required.	Select a Status from the drop down list.
Financial Payer	Field	1	A valid Financial Payer is required.	Select a payer from the drop down list.
	Field	102	Financial Payer cannot be different within Region segments unless Disposition is set up for 'ALL' Financial Payers.	Select the same payer as in parent disposition line item.
Region	Field	1	A valid Region is required.	Select a Region from the drop down list.
EOB	Hyperlink	1	A valid EOB is required.	Enter an EOB code or select an EOB using the search link.
	Hyperlink	101	EOB Codes cannot be different within Region segments unless Disposition is set up for 'ALL' Recipient Plans.	Change the EOB within Region Disp records to have the same code.
	Hyperlink	1	Error Code and EOB Code must match.	Change the EOB code to the same value as the error code. If required use link to the EOB panel to allow adding a new EOB code.

6.55.5 Disposition Criteria-Region Data-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.55.6 Disposition Criteria-Region Data-Error Disposition Panel Accessibility

6.55.6.1 To Access the Disposition Criteria-Region Data-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Disposition Criteria .	Disposition Criteria- Error Disposition Panel Accessibility information panel displays.
5	Select row from data list.	Disposition Criteria-Region Data -Error Disposition panel displays.

6.55.6.2 To Add on the Disposition Criteria-Region Data-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Region from the drop down list box.	
3	Select Disposition Status from drop down list box.	
4	Enter Description .	
5	Select Financial Payer from drop down list box.	
6	Enter EOB . Click [Search] if unknown.	
7	Click Save .	Disposition Criteria- Region Data -Error Disposition information is saved.

6.55.6.3 To Update on the Disposition Criteria-Region Data-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Disposition Criteria- Region Data -Error Disposition information is saved.

6.55.6.4 To Delete on the Disposition Criteria-Region Data-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.56 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel

6.56.1 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Narrative

This information on the Provider Type Specialty Data panel is used to include or exclude combinations of Provider type/specialty in/from participating in the disposition of the edit/audit.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Disposition Criteria (select row from the data list)]

6.56.2 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Layout

6.56.3 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new type specialty to the line item.	Button	N/A	0
Delete	Allows the user to remove a type specialty from the line item.	Button	N/A	0
Include/Exclude	Include Exclude indicator.	Combo Box	Drop Down List Box	0
Provider Role	Provider Role.	Combo Box	Drop Down List Box	0
Provider Specialty [Search]	The name of the Provider Specialty.	Hyperlink	N/A	0
Provider Type [Search]	The name of the Provider Type.	Hyperlink	N/A	0

6.56.4 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Include/Exclude	Field	1	Include/Exclude is required.	Select an indicator value from the drop down list.
	Field	2	Include/Exclude Indicators cannot be mixed within a role - is not valid.	Modify the include/exclude indicator.
Provider Role	Field	1	Provider Role is required.	Select a Provider Role.
	Field	2	Include/Exclude Indicators cannot be mixed within a role - is not valid.	Change the Provider Role or In/Ex indicator value.
Provider Specialty	Hyperlink	3	A valid Provider Specialty is required.	Select a Provider Specialty.
Provider Type	Hyperlink	1	A valid Provider Type is required.	Select a Provider Type.

6.56.5 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.56.6 Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel Accessibility

6.56.6.1 To Access the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Disposition Criteria .	Disposition Criteria- Error Disposition Panel Accessibility information panel displays.
5	Select row from data list.	Disposition Criteria-Provider Type Specialty Data-Error Disposition panel displays.

6.56.6.2 To Add on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from

Step	Action	Response
		lists.
2	Select Provider Role from the drop down list box.	
3	Select Provider Specialty by clicking [Search].	
4	Enter search criteria. User may also select a row from the list of search results.	Provider Specialty information is populated.
5	Select Provider Type by clicking [Search].	
6	Enter search criteria. User may also select a row from the list of search results.	Provider Type information is populated.
7	Select Include/Exclude from drop down list box.	
8	Click Save .	Disposition Criteria-Provider Type Specialty Data-Error Disposition information is saved.

6.56.6.3 To Update on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Disposition Criteria-Provider Type Specialty Data-Error Accessibility information is saved.

6.56.6.4 To Delete on the Disposition Criteria-Provider Type Specialty Data-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.57 NCPDP Response-Error Disposition Panel

6.57.1 NCPDP Response-Error Disposition Panel Narrative

The NCPDP (National Council for Prescription Drug Pricing) Response panel is used to associate a NCPDP response code to an Error Status Code. This association would only be used for drug related edits/audits.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] – [Error Disposition] - [NCPDP Response]

6.57.2 NCPDP Response-Error Disposition Panel Layout



6.57.3 NCPDP Response-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new association of a NCPDP Response code to the Error Code.	Button	N/A	0
Delete	Allows the user to delete a NCPDP response code association from the Error Code.	Button	N/A	0
NCPDP Response Text	Read only text description associated with specific NCPDP response code value.	Field	Character	50
NCPDP Response Code	Unique code number/value assigned to a specific reject message per National Council for Prescription Drug Pricing.	[Search]	N/A	0

6.57.4 NCPDP Response-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
NCPDP Response Code	[Search]	1	A valid NCPDP Response is required.	Select a NCPDP Response using the search link.

6.57.5 NCPDP Response-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.57.6 NCPDP Response-Error Disposition Panel Accessibility

6.57.6.1 To Access the NCPDP Response-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click NCPDP Response .	NCPDP Response-Error Disposition panel displays.

6.57.6.2 To Add on the NCPDP Response-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select NCPDP Response Code by clicking [Search]	
3	Enter search criteria. User may also select a row from the list of search results.	NCPDP Response Code Text information is populated.
4	Click Save .	NCPDP Response-Error Disposition information is saved.

6.57.6.3 To Delete on the NCPDP Response-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.58 Modification Log-Error Disposition Panel

6.58.1 Modification Log -Error Disposition Panel Narrative

The Modification Log panel allows users to enter notes as to why changes were made to a specific edit or audit.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Error Disposition] - [Modification Log]

6.58.2 Modification Log -Error Disposition Panel Note-Error Disposition Layout

The screenshot displays the 'Modification Log' window. At the top, there's a header bar with 'Modification Log' and navigation icons. Below it is a table with columns: Sequence Number, Clerk ID, Clerk Name, Date, Time, and Note. The table contains one row with the following values: Sequence Number 1, Clerk ID #MASQU09, Clerk Name (empty), Date 05/28/2010, Time 12:01:05, and Note Resolution Status updated on 05/28/2010 - after update. Below the table, there are input fields for Sequence Number (1), Date (05/28/2010), Clerk ID (#MASQU09), Time (120105), and Clerk Name. A large text area labeled 'Note*' contains the text 'Resolution Status updated on 05/28/2010 - after update'. An 'add' button is located at the bottom right of the panel.

6.58.3 Modification Log -Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Button to open an empty panel to add a new 'Log'.	Button	N/A	0
Clerk ID	Identification number of the user who enters the note. This value is set from the user's security profile.	Field	Alphanumeric	8
Clerk Name	Name of the user who enters the note. This value is set from the user's security profile.	Field	Alphanumeric	100
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Note	This is a free form text field that can be used to capture pertinent information related to the particular edit or audit error code.	Field	Character	1000
Sequence Number	System assigned Sequence number than can uniquely identify a note.	Field	Number (Integer)	9

Field	Description	Field Type	Data Type	Length
Time	The time that the note was entered.	Field	Number (Decimal)	6

6.58.4 Modification Log -Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Enter notes.

6.58.5 Modification Log -Error Disposition Panel Extra Features

Field	Field Type
Modification log is required while updating any panel for Error Disposition.	

6.58.6 Modification Log -Error Disposition Panel Accessibility

6.58.6.1 To Access the Modification Log -Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Modification Log .	Modification Log-Error Disposition panel displays.

6.58.6.2 To Add on the Modification Log -Error Disposition Panel

Step	Action	Response
1	Click Add . Date and time populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Modification Log-Error Disposition information is saved.

6.58.6.3 To Update on the Modification Log -Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Modification Log-Error Disposition information is saved.

6.59 Parameters-Error Disposition Panel

6.59.1 Parameters-Error Disposition Panel Narrative

The Parameters panel is used to provide parameter information to edits. For example, for edit 513 the panel is used to define the Recipient First Name and Recipient Last Name edit masks that the edit utilizes to compare the name on the claim to the name in the Recipient subsystem.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Error Disposition] - [Parameters]

6.59.2 Parameters-Error Disposition Panel Layout

Parameters

Effective Date End Date Parm Type Code Parm Value

A 12/31/2299

Type data below for new record.

Effective Date* 01/01/1900

End Date* 12/31/2299

Parm Type Code* DELSPACE - Delete spaces from name indicator

Parm Value* dsjakhjkshjsh

delete add

6.59.3 Parameters-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Used to add a new parameter value to the edit.	Button	N/A	0
Delete	Used to delete a parameter value from an edit.	Button	N/A	0
Effective Date	The Effective Date of the parameter value.	Field	Date (MM/DD/CCYY)	8
End Date	The End Date of the parameter value.	Field	Date (MM/DD/CCYY)	8
Parm Type Code	The parameter type; for example "RFN" for recipient first name mask.	Combo Box	Drop Down List Box	0
Parm Value	The value of the parameter; for example "XXX*****" for recipient first name (RFN) mask.	Field	Alphanumeric	4000

6.59.4 Parameters-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Invalid date.	Enter an Effective Date in MM/DD/CCYY format.
	Field	2	Edit Parm segments can not overlap.	Change the edit parm type or change the dates so no overlaps occur (the edit sets when there are overlapping date ranges for the same edit parm type).
	Field	3	Effective Date is required.	Enter an Effective Date.
	Field	4	Effective Date [MM/DD/CCYY 12:00:00 AM] must be less than or equal to End Date [MM/DD/CCYY 12:00:00 AM].	Enter an Effective Date that is less than or equal to the End Date
	Field	5	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Invalid date.	Enter a valid End Date in MM/DD/CCYY format.
	Field	2	End Date is required.	Enter an End Date.
	Field	3	Effective Date [MM/DD/CCYY 12:00:00 AM] must be less than or equal to End Date [MM/DD/CCYY 12:00:00 AM].	Enter an End Date that is greater than or equal to the Effective Date.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	5	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Parm Value	Field	1	Parm Value is required.	Enter a Parm Value.

6.59.5 Parameters-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.59.6 Parameters-Error Disposition Panel Accessibility

6.59.6.1 To Access the Parameters-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Parameters .	Parameters Error Disposition information panel displays.

6.59.6.2 To Add on the Parameters-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Effective Date in MM/DD/CCYY format.	
3	Enter End Date in MM/DD/CCYY format.	
4	Select Parm Code from drop down list box.	
5	Enter Parm Value .	
6	Click Save .	Parameters Error Disposition information is saved.

6.59.6.3 To Update on the Parameters-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Parameters-Error Disposition information is saved.

6.59.6.4 To Delete on the Parameters-Error Disposition Panel

Step	Action	Response
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1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.60 Resolution Clarification-Error Disposition Panel

6.60.1 Resolution Clarification-Error Disposition Panel Narrative

The Resolution Clarification panel is used to view, add, or update Clarifications associated with the exception. Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Clarification]

6.60.2 Resolution Clarification-Error Disposition Panel Layout

Resolution Clarification

Clarification Date	Clarification
A 02/15/2006	asdf
A 02/15/2006	test4
A 02/15/2006	
A 02/15/2006	test3
A 02/15/2006	
A 02/15/2006	
A 02/15/2006	this is a test2

Type data below for new record.

Clarification Date* 02/15/2006

Clarification* asdf

delete add

6.60.3 Resolution Clarification-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add a new clarification to the Error Code.	Button	N/A	0
Clarification	Free form text field that allows a user to enter a clarification related to the edit or audit.	Field	Character	50
Clarification Date	Date the clarification was created.	Field	Date (MM/DD/CCYY)	10
Delete	Allows user to delete a clarification from the Error Code.	Button	N/A	0

6.60.4 Resolution Clarification-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Clarification	Field	1	Clarification is required.	Enter a clarification.
Clarification Date	Field	1	A duplicate record cannot be saved.	Enter a unique Clarification Date. There can be only one clarification for one date.
	Field	2	Clarification Date is required.	Enter Clarification Date.
	Field	3	Invalid date.	Enter a Clarification Date that is numeric and in MM/DD/CCYY format.

Field	Field Type	Error Code	Error Message	To Correct
	Field	4	Clarification Date must be greater than or equal to 01/01/1900.	Enter a Clarification Date that is greater than or equal to 01/01/1900.
	Field	5	Clarification Date must be less than or equal to 12/31/2299.	Enter a Clarification Date that is less than or equal to 12/31/2299.

6.60.5 Resolution Clarification-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.60.6 Resolution Clarification-Error Disposition Panel Accessibility

6.60.6.1 To Access the Resolution Clarification-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Clarification .	Resolution Clarification-Error Disposition information panel displays.

6.60.6.2 To Add on the Resolution Clarification-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Clarification Date in MM/DD/CCYY format.	
3	Enter Clarification .	
4	Click Save .	Resolution Clarification-Error Disposition information is saved.

6.60.6.3 To Update on the Resolution Clarification-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Clarification-Error Disposition information is saved.

6.60.6.4 To Delete on the Resolution Clarification-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.61 Resolution Criteria-Error Disposition Panel

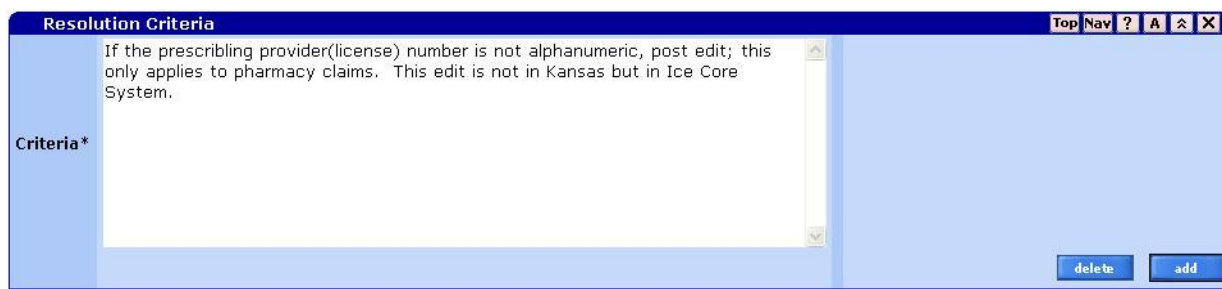
6.61.1 Resolution Criteria-Error Disposition Panel Narrative

Resolution Criteria panel describes the criteria for when the exception applies.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR ((click on 'search' and select row from search results)) - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Criteria]

6.61.2 Resolution Criteria-Error Disposition Panel Layout



6.61.3 Resolution Criteria-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add criteria for the Error Code if criteria does not already exist.	Button	N/A	0
Criteria	The text describing the criteria that causes the edit or audit to set.	Field	Character	999999999
Delete	Allows the user to delete the existing criteria from the Error Code.	Button	N/A	0

6.61.4 Resolution Criteria-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Criteria	Field	1	Criteria is required.	Enter criteria.

6.61.5 Resolution Criteria-Error Disposition Panel Extra Features

There is only one Resolution Criteria per Error Code. If a Resolution Criteria exists, the "Add" button is disabled.

6.61.6 Resolution Criteria-Error Disposition Panel Accessibility

6.61.6.1 To Access the Resolution Criteria-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Criteria .	Resolution Criteria-Error Disposition information panel displays.

6.61.6.2 To Add on the Resolution Criteria-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Criteria .	
3	Click Save .	Resolution Criteria-Error Disposition information is saved.

6.61.6.3 To Update on the Resolution Criteria-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Criteria-Error Disposition information is saved.

6.61.6.4 To Delete on the Resolution Criteria-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.62 Resolution Group-Error Disposition Panel

6.62.1 Resolution Group-Error Disposition Panel Narrative

The Resolution Group panel is used to view, add, or update groups associated with the exception.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition (Search)] - (Click on [Search] button) - (Select row from search results) - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Group]

6.62.2 Resolution Group-Error Disposition Panel Layout

The screenshot displays the 'Resolution Group' panel. At the top, there's a title bar with 'Resolution Group' and standard window controls. Below this, a 'Group Class' dropdown menu is visible, followed by a 'search' button. A 'clear' button is also present. A table shows a single record with columns: Group Class (A), Group Type/Description (0), Effective Date (11/26/2007), and End Date (12/31/2299). Below the table, there's a section for adding a new record with fields for Group Class*, Group Type* (with a [Search] button), Effective Date* (11/26/2007), and End Date* (12/31/2299). 'delete' and 'add' buttons are at the bottom right.

6.62.3 Resolution Group-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to associate the Error Code with a new Resolution group.	Button	N/A	0
Clear	Clears the criteria fields so user may enter new criteria.	Button	N/A	0
Delete	Allows the user to remove a resolution group from the error code.	Button	N/A	0
Description	Description of the Group Type selection. This value is taken from one of the following tables: T_REV_TYPE, T_TYPE_SPEC_CODE, T_MOD_GROUP_TYPE, T_DIAG_TYPE, T_PROC_ICD9_TYPE, T_TOB_TYPE, T_BENEFIT_PLAN_TYPE and T_PROC_TYPE. This field usually comes from dsc_50 or dsc_25.	[Search]	Character	50

Field	Description	Field Type	Data Type	Length
Effective Date	The date the group applies to this error code.	Field	Date (MM/DD/CCYY)	8
End Date	The last date the group applies to this error code.	Field	Date (MM/DD/CCYY)	8
Group Class	Identifies the name of the Group Class. The valid entries are: Revenue. Provider Type/Provider, Modifier, Diagnosis, ICD Procedure, Type of Bill, Benefit Plan and HCPCS Procedure.	Field	Drop Down List Box	0
Group Class (Search)	Identifies the name of the Group Class. The valid entries are: Revenue. Provider Type/Provider, Modifier, Diagnosis, ICD Procedure, Type of Bill, Benefit Plan and HCPCS Procedure.	Combo Box	Drop Down List Box	0
Group Type	Identifies the type of the group. If value is not known, click on search link.	Field	CLOB	0
Group Type/Description [Search]	Identifies the type of the group. If value is not known, click on search link.	Hyperlink	CLOB	0
Search	Initiates search on the database table for records matching the criteria entered.	Button	N/A	0

6.62.4 Resolution Group-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date[<Date>] must be less than or equal to End Date[<Date>].	Insert the Effective Date where the Effective Date is less than the end date.
	Field	3	Invalid date.	Enter a valid Effective Date. Date must be numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Effective Date must be greater than or equal to 01/01/1900.
	Field	5	Effective Date is required.	Enter a valid Effective Date.
	Field	1002	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.

Field	Field Type	Error Code	Error Message	To Correct
End Date	Field	1	Effective Date[<Date>] must be less than or equal to End Date[<Date>].	Insert the End Date where the End date is greater than the Effective Date.
	Field	3	Invalid date.	Enter a valid date. Date must be numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	5	End Date is required.	Enter End Date.
	Field	1001	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Group Class	Field	1	A valid Group is required.	Select a Group from the drop down list.
	Field	2	A duplicate record cannot be saved.	Enter a Type and Group combination that is unique.
Group Type	Field	1	A duplicate record cannot be saved.	Enter a Type and Group combination that is unique.
	Field	1000	Group Type must be greater than or equal to 0.	Select a group type using the [Search] feature.

6.62.5 Resolution Group-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.62.6 Resolution Group-Error Disposition Panel Accessibility

6.62.6.1 To Access the Resolution Group-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Group .	Resolution Group-Error Disposition information panel displays.

6.62.6.2 To Add on the Resolution Group-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from

Step	Action	Response
		lists.
2	Select Group Class from the drop down list box.	
3	Select Group Type by clicking [Search].	
4	Enter search criteria. User may also select a row from the list of search results.	Group Type information is populated.
5	Enter Effective Date in MM/DD/CCYY format.	
6	Enter End Date in MM/DD/CCYY format.	
7	Click Save .	Resolution Group-Error Disposition information is saved.

6.62.6.3 To Update on the Resolution Group-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Group-Error Disposition information is saved.

6.62.6.4 To Delete on the Resolution Group-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.63 Resolution Medical Policy-Error Disposition Panel

6.63.1 Resolution Medical Policy-Error Disposition Panel Narrative

The Resolution Medical Policy panel is used to view, add, or update error disposition resolution Medical Policy numbers. This panel allows the user to tie Medical Policy identifiers directly to an error status code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR ((click on 'search' and select row from search results)) - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Medical Policy]

6.63.2 Resolution Medical Policy-Error Disposition Panel Layout



6.63.3 Resolution Medical Policy-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to associate the Error Code with a new Medical Policy identifier.	Button	N/A	0
Delete	Allows the user to delete a Medical Policy identifier record from the Error Code.	Button	N/A	0
Medical Policy	Identifier for the policies that apply to this Error Code.	Field	Character	80

6.63.4 Resolution Medical Policy-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Medical Policy	Field	1	Medical Policy is required.	Enter a medical policy.
	Field	2	A duplicate record cannot be saved.	Enter a unique medical policy.

6.63.5 Resolution Medical Policy-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.63.6 Resolution Medical Policy-Error Disposition Panel Accessibility

6.63.6.1 To Access the Resolution Medical Policy-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Medical Policy .	Resolution Medical Policy-Error Disposition information panel displays.

6.63.6.2 To Add on the Resolution Medical Policy-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Medical Policy .	
3	Click Save .	Resolution Medical Policy-Error Disposition information is saved.

6.63.6.3 To Update on the Resolution Medical Policy-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Medical Policy-Error Disposition information is saved.

6.63.6.4 To Delete on the Resolution Medical Policy-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.64 Resolution Method of Correction-Error Disposition Panel

6.64.1 Resolution Method of Correction-Error Disposition Panel Narrative

The Resolution Method of Correction panel specifies the resolution method to be used in Correction.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR ((click on 'search' and select row from search results)] - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Method of Correction]

6.64.2 Resolution Method of Correction-Error Disposition Panel Layout

The screenshot shows a web application window titled "Resolution Method of Correction". The window has a blue header bar with "Top Nav ? A X" icons. Below the header, there is a text area with the text "Auto-denied by the claims system and will not suspend for clerical review." and a label "Method of Correction*". At the bottom right, there are "delete" and "add" buttons.

6.64.3 Resolution Method of Correction-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a Method of Correction for the error code if one does not already exist.	Button	N/A	0
Delete	Allows the user to delete a Method of Correction from the error code if one exists.	Button	N/A	0
Method of Correction	Explanation of how the error code is resolved either manually by a clerk, or systematically.	Field	Character	999999999

6.64.4 Resolution Method of Correction-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Method of Correction	Field	1	Method of Correction is required.	Enter a Method of Correction.

6.64.5 Resolution Method of Correction-Error Disposition Panel Extra Features

There is only one Method of Correction per Error Code. If a Method of Correction exists, the "Add" button is disabled.

6.64.6 Resolution Method of Correction-Error Disposition Panel Accessibility

6.64.6.1 To Access the Resolution Method of Correction-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Method of Correction .	Resolution Method of Correction-Error Disposition information panel displays.

6.64.6.2 To Add on the Resolution Method of Correction-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Method of Correction .	
3	Click Save .	Resolution Method of Correction-Error Disposition information is saved.

6.64.6.3 To Update on the Resolution Method of Correction -Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Method of Correction-Error Disposition information is saved.

6.64.6.4 To Delete on the Resolution Method of Correction-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.65 Resolution Note-Error Disposition Panel

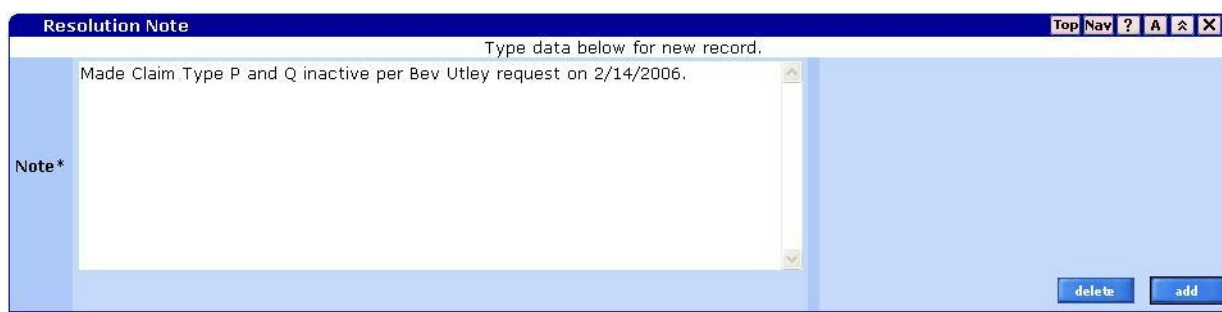
6.65.1 Resolution Note-Error Disposition Panel Narrative

The Resolution Note panel is used by the Resolution Clerk who may want to add to the handling or anything else about the error status code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition (Search)] - (Click on [Search] button) - (Select row from search results) - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Note]

6.65.2 Resolution Note-Error Disposition Panel Layout



6.65.3 Resolution Note-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a 'note' about Resolution of the error.	Button	N/A	0
Delete	Allows the user to remove a 'resolution note' from the error.	Button	N/A	0
Note	This is a note the resolution clerk may want to add to the handling or anything else about the ESC.	Field	Character	999999999

6.65.4 Resolution Note-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Enter a Resolution Note.

6.65.5 Resolution Note-Error Disposition Panel Extra Features

There is only one Resolution Note per Error Code. If a Resolution Note exists, the "Add" button is disabled.

6.65.6 Resolution Note-Error Disposition Panel Accessibility

6.65.6.1 To Access the Resolution Note Error-Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Note .	Resolution Note-Error Disposition information panel displays.

6.65.6.2 To Add on the Resolution Note-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Resolution Note-Error Disposition information is saved.

6.65.6.3 To Update on the Resolution Note-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Note-Error Disposition information is saved.

6.65.6.4 To Delete on the Resolution Note-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.66 Resolution Status-Error Disposition Panel

6.66.1 Resolution Status-Error Disposition Panel Narrative

The Resolution Status panel displays the information and date of status.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Error Disposition (Search)] - (click on [search] button) - (select row from search results) - [Error Disposition Maintenance] - [Error Disposition] - [Resolution Status]

6.66.2 Resolution Status-Error Disposition Panel Layout

The screenshot shows a web application window titled "Resolution Status". It features a header with "Status" and "Date" columns. Below the header, there is a form with a "Status*" dropdown menu and a "Date*" text field containing "11/26/2007". A message "Type data below for new record." is displayed above the form. At the bottom right, there are "delete" and "add" buttons.

6.66.3 Resolution Status-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a status regarding the resolution.	Button	N/A	0
Date	Date the status was associated with the resolution.	Field	Date (MM/DD/CCYY)	8
Delete	Allows the user to delete the status of a resolution.	Button	N/A	0
Status	Identifies the status of the resolution.	Combo Box	Drop Down List Box	0

6.66.4 Resolution Status-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Date	Field	1	Date is required.	Enter a valid Date.
	Field	2	Invalid date.	Enter a Date that is numeric and in MM/DD/CCYY format.
	Field	3	Date must be greater than or equal to 01/01/1900.	Enter a Date that is greater than or equal to 01/01/1900.
	Field	4	Date must be less than or equal to 12/31/2299.	Enter a Date that is less than or equal to 12/31/2299.
Status	Field	1	A valid Status is required.	Select a status from the drop down list.

Field	Field Type	Error Code	Error Message	To Correct
	Field	2	A duplicate record cannot be saved.	Select a unique status.

6.66.5 Resolution Status-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.66.6 Resolution Status-Error Disposition Panel Accessibility

6.66.6.1 To Access the Resolution Status-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Resolution Status .	Resolution Status-Error Disposition information panel displays.

6.66.6.2 To Add on the Resolution Status-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Status from the drop down list box.	
3	Enter Date in MM/DD/CCYY format	
4	Click Save .	Resolution Status-Error Disposition information is saved.

6.66.6.3 To Update on the Resolution Status-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Resolution Status-Error Disposition information is saved.

6.66.6.4 To Delete on the Resolution Status-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.67 Error Disposition - Audit Criteria Page

6.67.1 Error Disposition-Audit Criteria Page Narrative

The Error Disposition - Audit Criteria page is used to maintain audit criteria data.

This panel is inquiry only.

Navigation: [Reference] – [Error Disposition] – [Add] – [Audit Criteria]

6.67.2 Error Disposition - Audit Criteria Page Layout



6.67.3 Error Disposition-Audit Criteria Page Field Descriptions

Field	Description	Field Type	Data Type	Length
Audit Criteria Base	Link to the Audit Criteria Base panel.	Hyperlink	N/A	0
Audit Parameters	Link to the Audit Parameters panel.	Hyperlink	N/A	0
Cancel	Allows the user to cancel information related to Error Disposition.	Button	N/A	0
New	Allows the user to create information related to Error Disposition.	Button	N/A	0
Save	Allows the user to save information related to Error Disposition.	Button	N/A	0

6.67.4 Error Disposition-Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.67.5 Error Disposition-Extra Features

Field	Field Type
No extra features found for this panel.	

6.67.6 Error Disposition-Audit Criteria Page Accessibility

6.67.6.1 To Access the Error Disposition-Audit Criteria Page

Step	Action	Response
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1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Criteria .	Audit Criteria page displays.

6.68 Audit Criteria Base-Error Disposition Panel

6.68.1 Audit Criteria Base-Error Disposition Panel Narrative

The Audit Criteria Base panel contains a number of different indicators (Include/Exclude, Same/Different, Other) that give the user enormous flexibility by allowing them to set a variety of criteria relevant to a particular audit that causes the audit to set or be bypassed.

Include/Exclude Indicators indicate whether an attribute should be included, meaning the audit is set when those attributes are present, assuming all other criteria are met, or excluded, meaning the audit would be bypassed for those attributes, and set for all other attributes that were not excluded, assuming all other criteria are met.

Same/Different Indicators are used to determine which claims in history are used in the audit. For example, if the Procedure Same/Different indicator is set to 'Same', then a history claim is used only if the Procedure Code matches the one used on the current claim. If the indicator is set to 'Different', then a history claim is used only if the Procedure Code DOESN'T match the one used on the current claim. If the indicator is set to 'Both', then there is no limitation and history claims with all Procedure Codes is used in the audit. Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Criteria] - [Audit Criteria Base]

6.68.2 Audit Criteria Base-Error Disposition Panel Layout

Audit Criteria Base

Audit Type BL - BENEFIT LIMITS

Effective Date* 01/01/1900

End Date* 12/31/2049

Include/Exclude Indicators

Recipient Plan*	Exclude
Claim Type*	Include
Billing Provider Type*	None
Financial Payer*	None
Performing Provider Type*	Include
Billing Provider Specialty*	None
Performing Provider Specialty*	None
Recipient Age*	None
Place of Service*	None
Modifier*	None
Diagnosis*	None
Revenue Code*	None
Tooth Number*	None
Type of Bill*	None
NDC*	None
Therapeutic Class*	None
Generic Price*	None
GCN Sequence Number*	None
HICL*	None
AHFS Class*	None

Same/Different Indicators

Claim*	Both
Date of Service*	Both
Billing Provider*	Both
Financial Payer*	Both
Performing Provider*	Both
Billing Provider Location*	Both
Performing Provider Specialty*	Both
Procedure*	Both
Place of Service*	Both
Modifier*	Both
Diagnosis*	Both
Tooth Surface*	Both
Tooth Number*	Both
Tooth Quadrant*	Both
Performing Provider Location*	Both

Other Indicators

Gender*	Both
PA Override*	No
Match J Codes*	No
Service Limit*	No
Referral Override*	Not Considered
Diagnosis Type*	N/A
EPSDT REF	No

add

6.68.3 Audit Criteria Base-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new set of audit criteria for a specified time period for the Error Code.	Button	N/A	0
AHFS Class	Include/Exclude indicator for type of AHFS Class.	Combo Box	Drop Down List Box	0
Audit Type	Identifies the type of audit (i.e. limitation, conflict, negative contra, contra-indicated, step therapy, or umbrella).	Combo Box	Drop Down List Box	0
Billing Provider	Indication of whether the same or different provider number is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Billing Provider Location	Indication of whether the same or different Billing Provider Location is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Billing Provider Specialty	Include/Exclude indicator for provider specialty.	Combo Box	Drop Down List Box	0
Billing Provider Type	Include/Exclude indicator for provider type.	Combo Box	Drop Down List Box	0
Claim	Indication of whether the specified audit should audit against the current claim ICN that matches a history claim ICN (Same), or current claim ICN that does not match the history claim ICN (Different), or, current claim against all other history claims regardless of ICN match (Both).	Combo Box	Drop Down List Box	0
Claim Type	Include/Exclude indicator for claim type. Indicates if certain claim types should be included, meaning the audit will set for those claim types if all other criteria matches, or excluded, meaning the audit would be bypassed for those claim types.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Date of Service	Indication of whether the specified audit should audit against the current claim date of service that matches a history claim date of service, or current claim date of service that does not match the history claim date of service (Different), or, current claim date of service against all other history claims dates of service regardless of whether they match (Both).	Combo Box	Drop Down List Box	0
Diagnosis	Include/Exclude indicator for diagnosis. Indicates if certain diagnoses should be included, meaning the audit will set for those diagnoses if all other criteria matches, or excluded, meaning the audit would be bypassed for those diagnoses.	Combo Box	Drop Down List Box	0
Diagnosis Type	Indicates whether the diagnosis code(s) to be checked is (A)dmitt, (D)ischarge, (E)mergency, (P)rimary, (S)econdary, (Y)Any.	Combo Box	Drop Down List Box	0
Effective Date	First day, based on date of service, on which the assigned audit criteria are valid for processing.	Combo Box	Date (MM/DD/CCYY)	8
End Date	Last day, based on date of service, that the audit criteria are valid for processing.	Combo Box	Date (MM/DD/CCYY)	8
EPSDT REF	Indicates whether EPSDT referral claims are to be included or excluded from an audit criteria.	Combo Box	Drop Down List Box	0
Financial Payer (Include/Exclude)	Include/Exclude indicator for financial payer. Indicates which financial payer should be included, meaning the audit will set for those financial payers if all other criteria are met, or excluded, meaning the audit would be bypassed for those financial payers.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Financial Payer (Same/Different Indicator)	Indication of whether the specified audit should audit against the current claim financial payer that matches a history claim financial payer, or current claim financial payer that does not match the history claim financial payer (Different), or, current claim financial payer against all other history claim's financial payer regardless of whether they match (Both).	Combo Box	Drop Down List Box	0
GCN	Include/Exclude indicator for GCN. Indicates which GCN should be included, meaning the audit will set for those GCNs if all other criteria are met, or excluded, meaning the audit would be bypassed for those GCNs.	Combo Box	Drop Down List Box	0
GCN Sequence Number	Include/Exclude indicator for GCN Sequence Number. Indicates which GCN Sequence Numbers should be included, meaning the audit will set for those GCN Sequence Numbers if all other criteria are met, or excluded, meaning the audit would be bypassed for those GCN Sequence Numbers.	Combo Box	Drop Down List Box	0
Gender	Indicates which sex (male, female, both) should be included in the audit criteria. Only history claims with the specified gender type will be assessed by the audit.	Combo Box	Drop Down List Box	0
Generic Price	Include/Exclude indicator for generic price. Indicates which generic price indicator(s) should be included, meaning the audit will set for those generic price indicator(s) if all other criteria are met, or excluded, meaning the audit would be bypassed for those generic price indicator(s).	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
HICL	Include/Exclude indicator for HICL. Indicates which HICL(s) should be included, meaning the audit will set for those HICL(s) if all other criteria are met, or excluded, meaning the audit would be bypassed for those HICL(s).	Combo Box	Drop Down List Box	0
Match J Codes	Y/N flag used only with conflict audits that says whether or not the NDC code needs to be linked with a HCPCS code. In most cases, the HCPCS code would be a J code. If the current claim is pharmacy claim, would look for a Procedure Code in history against NDC on current claim. If the current claim is not pharmacy, would look for NDC in history against procedure on current claim.	Combo Box	Drop Down List Box	0
Modifier	Include/Exclude indicator for procedure modifier.	Combo Box	Drop Down List Box	0
Modifier	Indication of whether the same or different Modifier is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
NDC	Include/Exclude indicator for NDC. Indicates which NDC(s) should be included, meaning the audit will set for those NDC(s) if all other criteria are met, or excluded, meaning the audit would be bypassed for those NDC(s).	Combo Box	Drop Down List Box	0
PA Override	Indicates whether having a prior authorization on file will override the audit. If the indicator is set to Yes, and there is PA on file, the audit will be overridden, but if the indicator is set to No, a PA on file will not override the audit.	Combo Box	Drop Down List Box	0
Performing Provider	Indication of whether the same or different Performing Provider is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Performing Provider Location	Indication of whether the same or different Performing Provider Location is to be used in the audit criteria.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Performing Provider Specialty	Indication of whether Performing Provider Specialty is included, excluded, or not in the audit criteria.	Combo Box	Drop Down List Box	0
Performing Provider Type	Indication of whether Performing Provider Type is included, excluded, or not in the audit criteria.	Combo Box	Drop Down List Box	0
Place of Service	Include/Exclude indicator for Place of Service code which indicates the place of service to which this error code is limited.	Combo Box	Drop Down List Box	0
Procedure	Indication of whether the same or different Procedure Code is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Recipient Age	Include/Exclude indicator for recipient age.	Combo Box	Drop Down List Box	0
Recipient Plan	Include/Exclude indicator for Recipient Plan.	Combo Box	Drop Down List Box	0
Referral Override	Specifies criterion for bypassing an audit based on the presence of a referring provider on the claim being audited. Values are 'A' (any), 'P' (PCCM) and space (not considered).	Combo Box	Drop Down List Box	0
Revenue Code	Include/Exclude indicator for revenue code.	Combo Box	Drop Down List Box	0
Service Limit	Indicates whether the audit is reported by EVS when the service limit enforced by the audit has been reached.	Combo Box	Drop Down List Box	0
Therapeutic Class	Include/Exclude indicator for therapeutic class.	Combo Box	Drop Down List Box	0
Tooth Number	Indication of whether the same or different tooth identification number is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Tooth Number	Indicates whether Tooth Number is included.	Combo Box	Drop Down List Box	0
Tooth Quadrant	Indication of whether the same or different Tooth Quadrant is to be used in the audit criteria.	Combo Box	Drop Down List Box	0
Tooth Surface	Indication of whether the same or different tooth surface number is to be used in the audit criteria.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Type of Bill	Include/Exclude indicator for type of bill.	Combo Box	Drop Down List Box	0

6.68.4 Audit Criteria Base-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Audit Type	Combo Box	1	Limitation Parameter information is required for this type of Audit Criteria.	Add Limitation parameter data on 'Audit Parameters' panel
	Combo Box	2	Contra Parameter information is required for this type of Audit Criteria.	Add contra parameter data on 'Audit Parameters' panel
	Combo Box	3	Umbrella Parameter information is required for this type of Audit Criteria.	Add umbrella parameter data on 'Audit Parameters' panel
	Combo Box	4	Step Therapy Group information is required for this type of Audit Criteria.	Add Step Therapy Group information on 'Step Therapy' panel
	Combo Box	5	Audit Step Therapy Level information is required.	Add Step Therapy Level information to the Step Therapy Group.
	Combo Box	6	Audit Type is required.	Select an audit type from the drop down list.
	Combo Box	7	Conflict Parameter information is required for this type of Audit Criteria.	Add Conflict parameter data on 'Audit Parameters' panel
	Combo Box	8	Negative Contra Parameter information is required for this type of Audit Criteria.	Add Negative Contra parameter data on 'Audit Parameters' panel
Effective Date	Field	1	Effective Date[] must be less than or equal to End Date[]	Insert the effective date where the effective date is less than the end date.
	Field	2	Effective Date[] is required.	Enter a date.
	Field	3	Invalid date. Format is MM/DD/CCYY.	Date must be numeric and in MM/DD/CCYY format.
	Field	4	Effective Date[] must be greater than or equal to 1/1/1900.	Date must be more recent than 1/1/1900
	Field	5	Effective Date must be less than or equal to 12/31/2299.	Effective Date must be greater than or equal to 1/1/1900.
End Date	Field	1	Effective Date[] must be less than or equal to End Date[]	Insert the end date where the end date is greater than the effective date.
	Field	2	End Date[] is required.	Enter a date.
	Field	3	Invalid date. Format is MM/DD/CCYY.	Date must be numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 1/1/1900.	Date must be more recent than 1/1/1900
	Field	5	End Date must be less than or equal to 12/31/2299.	End Date must be greater than or equal to 1/1/1900.

6.68.5 Audit Criteria Base-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.68.6 Audit Criteria Base-Error Disposition Panel Accessibility

6.68.6.1 To Access the Audit Criteria Base-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels display.
4	Click Audit Criteria .	Audit Criteria page displays.
5	Click Audit Criteria Base .	Audit Criteria Base information panel displays.

6.68.6.2 To Add on the Audit Criteria Base-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Audit Type from drop down list box.	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Enter End Date in MM/DD/CCYY format.	
5	Select Recipient Plan from drop down list box.	
6	Select Claim Type from drop down list box.	
7	Select Billing Provider Type from drop down list box.	
8	Select Billing Provider Speciality from drop down list box.	
9	Select Performing Provider Type from drop down list box.	
10	Select Billing Provider Specialty from drop down list box.	
11	Select Performing Provider Specialty from drop down list box.	
12	Select Recipient Age from drop down list box.	

Step	Action	Response
13	Select Place of Service from drop down list box.	
14	Select Modifier from drop down list box.	
15	Select Diagnosis from drop down list box.	
16	Select Revenue Code from drop down list box.	
17	Select Type of Bill from drop down list box.	
18	Select NDC from drop down list box.	
19	Select Therapeutic Class from drop down list box.	
20	Select Generic Price from drop down list box.	
21	Select GCN Sequence Number from drop down list box.	
22	Select HICL from drop down list box.	
23	Select Financial Payer from drop down list box.	
24	Select Tooth Number from drop down list box.	
25	Select AFHS Class from drop down list box.	
Same/Indifferent Indicators		
26	Select Claim from drop down list box.	
27	Select Date of Service from drop down list box.	
28	Select Financial Payer from drop down list box.	
29	Select Billing Provider from drop down list box.	
30	Select Performing Provider from drop down list box.	
31	Select Procedure from drop down list box.	
32	Select Diagnosis from drop down list box.	
33	Select Place of Service from drop down list box.	
34	Select Tooth Number from drop down list box.	
35	Select Tooth Surface from drop down list box.	

Step	Action	Response
36	Select Tooth Quadrant from drop down list box.	
37	Select Billing Provider Location from drop down list box.	
38	Select Performing Provider Location from drop down list box.	
39	Select Modifier from drop down list box.	
Other Indicators		
40	Select Gender from drop down list box.	
41	Select PA Override from drop down list box.	
42	Select Match J Codes from drop down list box.	
43	Select Service Limit from drop down list box.	
44	Select Referral Override from drop down list box.	
45	Select Diagnosis Type from drop down list box.	
46	Select EPSDT REF from drop down list box.	
47	Click Save .	Audit Criteria Base-Error Disposition information is saved.

6.68.6.3 To Update on the Audit Criteria Base-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Criteria Base-Error Disposition information is saved.

6.68.6.4 To Delete on the Audit Criteria Base-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.69 Audit Parameters (Conflict)-Error Disposition Panel

6.69.1 Audit Parameters (Conflict)-Error Disposition Panel Narrative

The Audit Parameters (Conflict) panel maintains information about auditing performed for services that contradict services that have already been paid for a recipient , also known as relationship auditing criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (select row from search results)] - [Audit Criteria] - [Audit Parameters (only available if the Audit Type is Conflict)]

6.69.2 Audit Parameters (Conflict)-Error Disposition Panel Layout

6.69.3 Audit Parameters (Conflict)-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a contra-indicated parameter to the audit.	Button	N/A	0
After Units	Specifies the number of units (days, months, years) in history that should be checked after a claim's dates of service.	Field	Number (Integer)	4
Before / After Code	Indicates whether the time limit specified should be checked for services before, after, or before and after the current claim.	Combo Box	Drop Down List Box	0
Before Units	Specifies the number of units (days, months, years) in history that should be checked before a claim's dates of service.	Field	Number (Integer)	4
Direction	Indicates whether the audit is a one-way or two-way audit.	Combo Box	Drop Down List Box	0
Time Unit	Indicates whether days, months, or years should be used as the unit of measure for the audit.	Combo Box	Drop Down List Box	0

6.69.4 Audit Parameters (Conflict)-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
After Units	Field	1	Enter a valid value.	Enter a numeric value from 0 to 9999.

Field	Field Type	Error Code	Error Message	To Correct
Before Units	Field	1	Enter a valid value.	Enter a numeric value from 0 to 9999.
Time Unit	Field	1	Time Unit is Required.	Select a valid Time Unit.

6.69.5 Audit Parameters (Conflict)-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.69.6 Audit Parameters (Conflict)-Error Disposition Panel Accessibility

6.69.6.1 To Access the Audit Parameters (Conflict) -Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Criteria .	Audit Criteria page displays.
5	Click Audit Parameters . Note: Only available if the Audit Type is Conflict.	Audit Parameters (Conflict) information panel displays.

6.69.6.2 To Add on the Audit Parameters (Conflict)-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Time Unit from drop down list box.	
3	Enter Before Units .	
4	Enter After Units .	
5	Select Before/After Code from drop down list box.	
6	Select Direction from drop down list box.	
7	Click Save .	Audit Parameters (Conflict)-Error Disposition information is saved.

6.69.6.3 To Update on the Audit Parameters (Conflict)-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.

Step	Action	Response
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Parameters (Conflict) -Error Disposition information is saved.

6.69.6.4 To Delete on the Audit Parameters (Conflict)-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.70 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel

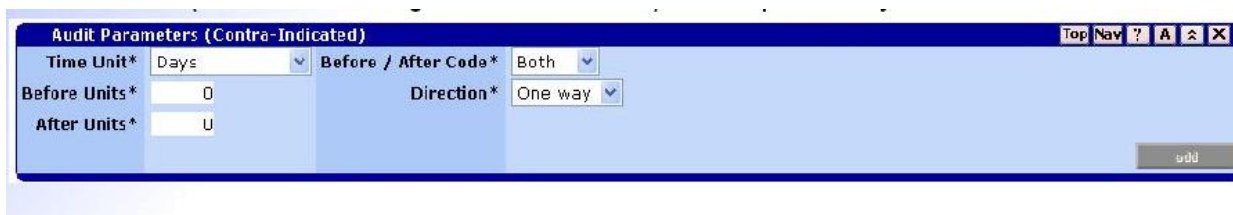
6.70.1 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Narrative

The Audit Parameters (Contra-Indicated-Negative Contra-Indicated) panel contains information about auditing performed for services that contradict services or negative contraindicated services that have already been paid for a recipient. Also known as relationship auditing criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Criteria] - [Audit Parameters (only available if the Audit Type is Contra-Indicated or negative contra-indicated)]

6.70.2 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Layout



6.70.3 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add Contra Parameter data to the audit.	Button	N/A	0
After Units	Specifies the number of units (days, months, years) in history that should be checked after a claim's dates of service.	Field	Number (Integer)	4
Before / After Code	Indicates whether the time limit specified should be checked for services before, after, or before and after the current claim.	Combo Box	Drop Down List Box	0
Before Units	Specifies the number of units (days, months, years) in history that should be checked before a claim's dates of service.	Field	Number (Integer)	4
Direction	This indicates whether the audit is a one-way or two-way audit.	Combo Box	Drop Down List Box	0
Time Unit	Indicates whether days, months, or years should be used as the unit of measure for the audit.	Combo Box	Drop Down List Box	0

6.70.4 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
After Units	Field	1	Enter a valid value.	Enter a numeric value from 0 to 9999.
	Field	2	After Units is required.	Enter a numeric value from 0 to 9999.
	Field	3	After Units must be zero	If 'Before / After Code' is 'Before', 'After Units' must be zero.
Before Units	Field	1	Enter a valid value.	Enter a numeric value from 0 to 9999.
	Field	2	Before Units is required.	Enter a numeric value from 0 to 9999.
	Field	3	Before Units must be zero.	If 'Before / After Code' is 'After', 'Before Units' must be zero.

6.70.5 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Extra Features

Contra and Neg-Contra use the same tables. Claims uses the field in the audit criteria table (cde_error_type) to determine HOW to use the data in the table to execute the audit. The difference between the two is that Contra looks for procedures that SHOULD NOT be billed together and Negative-Contra looks for procedures that SHOULD be billed together.

6.70.6 Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel Accessibility

6.70.6.1 To Access the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Criteria .	Audit Criteria page displays.
5	Click Audit Parameters . Note: Only available if the Audit Type is Contra-Indicated or negative contra-indicated.	Audit Parameters (Contra-Indicated-Negative Contra-Indicated) information panel displays.

6.70.6.2 To Add on the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Time Unit from drop down list box.	
3	Enter Before Units .	
4	Enter After Units .	
5	Select Before/After Code from drop down list box.	
6	Select Direction from drop down list box.	
7	Click Save .	Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition information is saved.

6.70.6.3 To Update on the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Parameters (Contra-Indicated-Negative Contra-Indicated) -Error Disposition information is saved.

6.70.6.4 To Delete on the Audit Parameters (Contra-Indicated-Negative Contra-Indicated)-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.71 Audit Parameters (Limitation)-Error Disposition Panel

6.71.1 Audit Parameters (Limitation)-Error Disposition Panel Narrative

The Audit Parameters (Limitation) panel contains the limitation audit parameters, including the time span audited, the number of allowed units and/or dollars, and whether the audit is restricted to particular places of service.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Criteria] - [Audit Parameters (only available if the Audit Type is Limit)]

6.71.2 Audit Parameters (Limitation)-Error Disposition Panel Layout

The screenshot shows a web application window titled "Audit Parameters (Limit)". It has a standard Windows-style title bar with "Top", "Nav", and icons for help, print, and close. The main content area is split into two columns. The left column contains the following fields: "Unit Type*" with a dropdown menu showing "Units", "Time Unit*" with a dropdown menu showing "Calendar Years", "Units Limit*" with a text input field containing "1.00", "Benefit Limit Key" with a dropdown menu showing "N/A", and "Benefit Limit Cat Sus" with a dropdown menu. The right column contains: "Procedure/Revenue/Drug" with a dropdown menu showing "Procedure", "Time Span*" with a text input field containing "1", "Money Limit*" with a text input field containing "\$0.00", and "Benefit Limit Cat" with a dropdown menu. A "Save" button is located at the bottom right of the panel.

6.71.3 Audit Parameters (Limitation)-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add limit parameter data to Limitation Audit.	Button	N/A	0
Benefit Limit Cat	Identifies the classification of service being tracked/counted.	Combo Box	Drop Down List Box	0
Benefit Limit Cat Sus	Used for Benefit Limit audits to count visits/contacts/encounters.	Combo Box	Drop Down List Box	0
Benefit Limit Key	Identifies if the contact count is by member, both member and provider or by pharmacy.	Combo Box	Drop Down List Box	0
Money Limit	Maximum number of dollars allowed for specified services.	Field	Number (Decimal)	11
Procedure/Revenue/Drug	This code indicates whether the limitation audit limits Procedure Codes, drug or revenue codes.	Combo Box	Drop Down List Box	0
Time Span	Specifies the number of units (days, months, years) in history that should be checked before a claim's dates of service.	Field	Number (Integer)	4

Field	Description	Field Type	Data Type	Length
Time Unit	Indicates whether days, months, or years should be used as a unit of measure for an audit.	Combo Box	Drop Down List Box	0
Unit Type	Indicates whether units, dollars, or both should be used as the unit of measure for audit.	Combo Box	Drop Down List Box	0
Units Limit	Maximum number of units allowed for specified services.	Field	Number (Decimal)	11

6.71.4 Audit Parameters (Limitation)-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Money Limit	Field	1	Enter a valid value.	Enter a valid amount.
	Field	2	Money Limits must be greater than zero.	If Unit Type is 'Both Units/Money', then you must insert a value greater than zero.
	Field	3	Money Limits must be zero.	If the Unit Type is 'Days' or 'Prescription' or 'Units', then you must insert zero in the money limit field.
	Field	5	Money Limits are required.	If Unit Type is "M", then Money Limit is required.
Time Span	Field	2	Enter a valid value	Time Span must be numeric and greater than zero.
	Field	3	Time Span is required.	Enter a valid Time Span.
Time Unit	Field	1	Time Unit is required.	Select a Time Unit from the drop down list.
Unit Type	Field	1	Unit Type is required.	Select a Unit type from the drop down list.
Units Limi	Field	1	Unit Limits must be greater than zero.	If Unit Type is 'Both Units/Money', then you must insert a value greater than zero -If unit type is "P" (prescription) or "U" (units), then you must insert a value greater than zero in Unit limit field.
	Field	2	Enter a valid value.	Unit Limits must be numeric and greater than zero.

Field	Field Type	Error Code	Error Message	To Correct
	Field	4	Unit Limits are required.	If Unit Type is 'Days', or 'Prescription', or 'Units', then Unit Limit is required.
	Field	6	Unit Limits must be zero.	If Unit Type is 'Money', then you must insert zero in Unit Limit field.

6.71.5 Audit Parameters (Limitation)-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.71.6 Audit Parameters (Limitation)-Error Disposition Panel Accessibility

6.71.6.1 To Access the Audit Parameters (Limitation)-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels display.
4	Click Audit Criteria .	Audit Criteria page displays.
5	Click Audit Parameters . Note: Only available if the Audit Type is Limit.	Audit Parameters (Limitation) information panel displays.

6.71.6.2 To Add on the Audit Parameters (Limitation)-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Unit Type from drop down list box.	
3	Select Time Unit from drop down list box.	
4	Enter Time Span .	
5	Enter Units Limit .	
6	Select Benefit Limit Cat from drop down list box.	
7	Select Procedure/Revenue/Drug from drop down list box.	
8	Select Money Limit from drop down list box.	
9	Select Benefit Limit Key from drop down list box.	
10	Select Benefit Limit Cat SUS from drop down list box.	
11	Click Save .	Audit Parameters (Limitation)-Error Disposition information is saved.

6.71.6.3 To Update on the Audit Parameters (Limitation)-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Parameters (Limitation)-Error Disposition information is saved.

6.71.6.4 To Delete on the Audit Parameters (Limitation)-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.72 Error Disposition-Audit Restriction Page

6.72.1 Error Disposition-Audit Restriction Page Narrative

The Error Disposition - Audit Restriction page is used to maintain audit restriction data.

This panel is inquiry only.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction]

6.72.2 Error Disposition-Audit Restriction Page Layout

The screenshot shows the 'Error Disposition Maintenance' interface. On the left, there's a sidebar with 'Error Disposition', 'Audit Criteria', and 'Audit Restriction' (selected). The main area is titled 'Select an area to add or modify' and contains a grid of 18 links arranged in 3 columns and 6 rows. The links are: Age, AHFS Class, Claim Type, Diagnosis, Financial Payer, GCN Sequence, GPI, HICL, NDC, POS, Procedure, Provider Specialty, Provider Type, Recipient Plan, Revenue Code, Therapeutic Class, Tooth Number, and Type of Bill. At the bottom of the main area are three buttons: 'save', 'cancel', and 'new'. The top right of the page has navigation links: 'Prefs', 'Top', 'Bot', '?', and an up arrow.

6.72.3 Error Disposition-Audit Restriction Page Field Descriptions

Field	Description	Field Type	Data Type	Length
Age	Link to the Age panel.	Hyperlink	N/A	0
AHFS Class	Link to the AHFS Class panel.	Hyperlink	N/A	0
Cancel	Allows the user to cancel changes.	Button	N/A	0
Claim Type	Link to the Claim Type panel.	Hyperlink	N/A	0
Diagnosis	Link to the Diagnosis panel.	Hyperlink	N/A	0
Financial Payer	Link to the Financial Payer panel.	Hyperlink	N/A	0
GCN Sequence	Link to the GCN Sequence panel.	Hyperlink	N/A	0
GPI	Link to the GPI panel.	Hyperlink	N/A	0
HICL	Link to the HICL panel.	Hyperlink	N/A	0
NDC	Link to the NDC panel.	Hyperlink	N/A	0
New	Allows the user to add information.	Button	N/A	0
POS	Link to the POS panel.	Hyperlink	N/A	0
Procedure	Link to the Procedure panel.	Hyperlink	N/A	0
Provider Specialty	Link to the Provider Specialty panel.	Hyperlink	N/A	0
Provider Type	Link to the Provider Type panel.	Hyperlink	N/A	0
Recipient Plan	Link to the Recipient Plan panel.	Hyperlink	N/A	0
Revenue Code	Link to the Revenue Code panel.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Save	Allows the user to save changes.	Button	N/A	0
Therapeutic Class	Link to the Therapeutic Class panel.	Hyperlink	N/A	0
Tooth Number	Link to the Tooth Number panel.	Hyperlink	N/A	0
Type of Bill	Link to the Type of Bill panel.	Hyperlink	N/A	0

6.72.4 Error Disposition-Audit Restriction - Procedure Page Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this page.				

6.72.5 Error Disposition-Audit Restriction - Procedure Page Extra Features

Field	Field Type
No extra features found for this page.	

6.72.6 Error Disposition-Audit Restriction - Procedure Page Accessibility

6.72.6.1 To Access the Error Disposition-Audit Restriction-Procedure Page

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.

6.73 Audit Restriction-Age-Error Disposition Panel

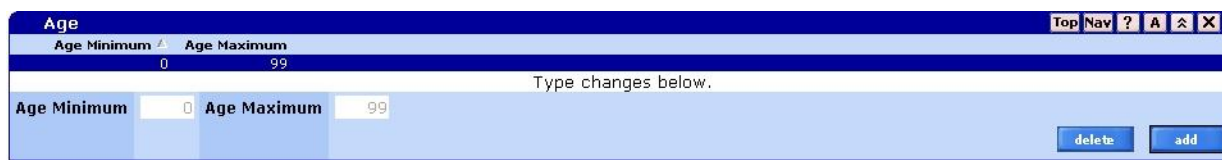
6.73.1 Audit Restriction-Age-Error Disposition Panel Narrative

The Audit Restriction –Age Error Panel is used to look-up age restriction information.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Age (only available if Recipient Age on Audit Criteria Base is 'Include' or 'exclude']

6.73.2 Audit Restriction-Age-Error Disposition Panel Layout



6.73.3 Audit Restriction-Age-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add an age range restriction.	Button	N/A	0
Age Maximum	Maximum age in a range that should be included or excluded from audit criteria.	Field	Number (Integer)	4
Age Minimum	Minimum age in a range that should be included or excluded from audit criteria.	Field	Number (Integer)	4
Delete	Allows the user to delete an Age Range Restriction.	Button	N/A	0

6.73.4 Audit Restriction-Age-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Age Maximum	Field	1	Age Maximum must be less than or equal to 999.	Enter an Age Maximum that is less than or equal to 999.
	Field	2	Age Maximum must be greater than or equal to Age Minimum.	Enter an Age Maximum that is greater than or equal to Age Minimum.
	Field	3	Enter a valid value.	Age must be numeric and greater than or equal to zero.
	Field	4	Age range segments can not overlap.	Check the Age against existing records. Range cannot overlap.
Age Minimum	Field	1	Age Minimum must be less than or equal to 999.	Enter an Age Minimum that is less than or equal to 999.

Field	Field Type	Error Code	Error Message	To Correct
	Field	2	Enter a valid value.	Age must be numeric and greater than or equal to zero.
	Field	3	Age range segments can not overlap.	Check the Age against existing records. Range cannot overlap.

6.73.5 Audit Restriction-Age-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.73.6 Audit Restriction-Age-Error Disposition Panel Accessibility

6.73.6.1 To Access the Audit Restriction-Age-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Age . Note: Only available if Recipient Age on Audit Criteria Base is 'Include' or 'exclude'.	Audit Restriction-Age-Error Disposition Panel Accessibility information panel displays.

6.73.6.2 To Add on the Audit Restriction-Age-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Age Minimum .	
3	Enter Age Maximum .	
4	Click Save .	Audit Restriction-Age-Error Disposition information is saved.

6.73.6.3 To Update on the Audit Restriction-Age-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-Age-Error Disposition

Step	Action	Response
		information is saved.

6.73.6.4 To Delete on the Audit Restriction-Age-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.74 Audit Restriction-AHFS Class-Error Disposition Panel

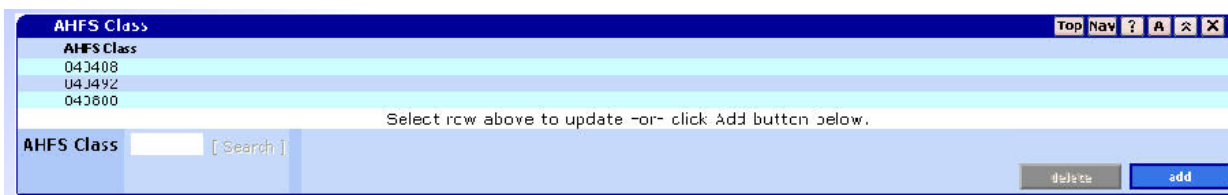
6.74.1 Audit Restriction-AHFS Class-Error Disposition Panel Narrative

The Audit Restriction-AFHS Class panel is used to look-up AHFS Class restriction information.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference - Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [(Expand Error Disposition on left by clicking +)] - [Audit Restriction] - [AHFS Class (only available if AHFS Class on Audit Criteria Base is "Include" or "Exclude")].

6.74.2 Audit Restriction-AHFS Class-Error Disposition Panel Layout



6.74.3 Audit Restriction-AHFS Class-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add an AHFS class.	Button	N/A	0
Delete	Allows the user to delete an AHFS class.	Button	N/A	0
AHFS Class	Identifies the pharmacologic therapeutic category of the drug product according to the American Hospital Formulary Service (AHFS) classification system.	Field	Character	6

6.74.4 Audit Restriction-AHFS Class-Error Disposition Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
AHFS Class	Field	2	AHFS Class contains duplicates.	Enter a unique AHFS Class.
	Field	3	AHFS Class is required.	Enter a valid AHFS Class.

6.74.5 Audit Restriction-AHFS Class-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.74.6 Audit Restriction-AHFS Class-Error Disposition Panel Accessibility

6.74.6.1 To Access the Audit Restriction- AHFS Class -Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click AHFS Class . Note: Only available if Recipient Age on Audit Criteria Base is 'Include' or 'exclude'.	Audit Restriction-AHFS Class-Error Disposition panel displays.

6.74.6.2 To Add on the Audit Restriction- AHFS Class -Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Age Minimum .	
3	Enter Age Maximum .	
4	Click Save .	Audit Restriction-Age-Error Disposition information is saved.

6.74.6.3 To Update on the Audit Restriction- AHFS Class -Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-Age-Error Disposition information is saved.

6.74.6.4 To Delete on the Audit Restriction- AHFS Class -Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.75 Audit Restriction-Claim Type-Error Disposition Panel

6.75.1 Audit Restriction-Claim Type-Error Disposition Panel Narrative

The Claim Type-Audit Restriction panel is used to maintain the list of claim type restrictions for conflict audits.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Claim Type (only available if Claim Type on Audit Criteria Base is "Include" or "Exclude")]

6.75.2 Audit Restriction-Claim Type-Error Disposition Panel Layout

Current Claim Type	Current Claim Form	History Claim Type	History Claim Form	Conflict Indicator
I - INPATIENT CLAIMS	UB92	O - OUTPATIENT CLAIMS	UB92	Yes
A - UB92 INST XOVER CLAIMS	UB92	I - INPATIENT CLAIMS	UB92	No

Select row above to update -or- click Add button below.

Current Claim Type: History Claim Type:

Current Claim Form: History Claim Form:

Conflict Indicator:

6.75.3 Audit Restriction-Claim Type-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a claim type restriction to the audit.	Button	N/A	0
Conflict Indicator	Indicates Yes or No. If Yes, causes execution of conflict date overlap logic.	Combo Box	Drop Down List Box	0
Current Claim Form	Claim form for current claim.	Field	Alphanumeric	4
Current Claim Type	Type of claim for the current claim.	Combo Box	Drop Down List Box	0
Delete	Allows the user to delete a claim type restriction from the audit	Button	N/A	0
History Claim Form	Claim form for history claim. This field is auto-populated after a History Claim Type has been selected.	Field	Alphanumeric	4
History Claim Type	Type of claim for a past claim.	Combo Box	Drop Down List Box	0

6.75.4 Audit Restriction-Claim Type-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Current Claim Type	Field	1	Current/History Claim Type - Invalid Combination.	Select a valid Current/History claim type combination.
	Field	2	A duplicate record cannot be saved.	Verify keying. The information entered already exists. Enter a unique Current/History claim type combination.
	Field	3	A valid Current Claim Type is required.	Select a Claim Type from the drop down field.
History Claim Type	Field	1	Current/History Claim Type - Invalid Combination.	Select a valid Current/History claim type combination.
	Field	2	A duplicate record cannot be saved.	Verify keying. The information entered already exists. Enter a unique Current/History claim type combination.
	Field	3	A valid History Claim Type is required.	Select a Claim Type from the drop down field.

6.75.5 Audit Restriction-Claim Type-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.75.6 Audit Restriction-Claim Type-Error Disposition Panel Accessibility

6.75.6.1 To Access the Audit Restriction- Claim Type-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Claim Type . Note: Only available if Claim Type on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- Claim Type-Error Disposition Panel Accessibility information panel displays.

6.75.6.2 To Add on the Audit Restriction- Claim Type-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Current Claim Type from drop down list box.	
3	Enter Current Claim Form .	
4	Select History Claim Type from drop down list box.	
5	Enter History Claim form .	
6	Select Conflict Indicator from drop down list box.	
7	Click Save .	Audit Restriction-Claim Type-Error Disposition information is saved.

6.75.6.3 To Update on the Audit Restriction- Claim Type-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction- Claim Type-Error Disposition information is saved.

6.75.6.4 To Delete on the Audit Restriction- Claim Type-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.76 Audit Restriction-Diagnosis-Error Disposition Panel

6.76.1 Audit Restriction-Diagnosis-Error Disposition Panel Narrative

The Audit Diagnosis Limitations panel is used to add diagnosis codes to be included in or excluded from the audit criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Diagnosis (only available if Diagnosis on Audit Criteria Base is "Include" or "Exclude")]

6.76.2 Audit Restriction-Diagnosis-Error Disposition Panel Layout

ICD Version	Diagnosis From	Diagnosis To
9	44421	44422
9	44481	44481
9	9580	9580
9	9991	9991
0	V1643	V2631

Select row above to update -or- click Add button below.

Diagnosis From [] [Search] Diagnosis To [] [Search]

ICD Version ICD-10 ▼

delete add

6.76.3 Audit Restriction-Diagnosis-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a Diagnosis restriction to the audit.	Button	N/A	0
Delete	Remove a Diagnosis restriction from the audit.	Button	N/A	0
Diagnosis From [Search]	System assigned key that uniquely identifies a specific diagnosis or the first in range of diagnosis that should be included or excluded from audit criteria.	Field	Character	7
Diagnosis To [Search]	System assigned key that identifies that last diagnosis in a range.	Field	Character	7
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values will be '9' for ICD-9 and '0' for ICD-10.	Combo Box	Character	1

6.76.4 Audit Restriction-Diagnosis-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Diagnosis From	Field	1	A valid Diagnosis From is required.	Select a Diagnosis.
	Field	2	Diagnosis From is greater than To Diag.	Select 'Diagnosis From' where the value is less than or equal to the 'Diagnosis To'.
	Field	3	Diagnosis. range segments can not overlap.	Correct overlap condition. Diagnosis From/Diagnosis To combination cannot overlap an existing segment.
	Field	4	ICD Version of From and To code must match with version in ICD Version Dropdown.	ICD Version for Diagnosis From, To and ICD Version Dropdown should be same for a record.
Diagnosis To	Field	1	A valid Diagnosis To is required.	Select a Diagnosis.
	Field	2	From Diagnosis. is greater than To Diagnosis.	Select 'Diagnosis To' where the value is greater than or equal to the 'Diagnosis From'.
	Field	3	ICD Version of From and To code must match with version in ICD Version Dropdown.	ICD Version for Diagnosis From, To and ICD Version Dropdown should be same for a record.
ICD Version	Combo Box	1	ICD Version of From and To code must match with version in ICD Version Dropdown.	ICD Version for Diagnosis From, To and ICD Version Dropdown should be same for a record.

6.76.5 Audit Restriction-Diagnosis-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.76.6 Audit Restriction-Diagnosis-Error Disposition Panel Accessibility

6.76.6.1 To Access the Audit Restriction-Diagnosis-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.

Step	Action	Response
5	Click Diagnosis . Note: Only available if Diagnosis on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- Diagnosis - Disposition Panel Accessibility information panel displays.

6.76.6.2 To Add on the Audit Restriction-Diagnosis-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Diagnosis From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	Diagnosis From information is displayed on panel.
4	Select Diagnosis To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	Diagnosis To is displayed on panel.
6	Click Save .	Audit Restriction-Diagnosis-Disposition information is saved.

6.76.6.3 To Update on the Audit Restriction-Diagnosis-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-Diagnosis-Disposition information is saved.

6.76.6.4 To Delete on the Audit Restriction-Diagnosis-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.77 Audit Restriction-Financial Payer-Error Disposition Panel

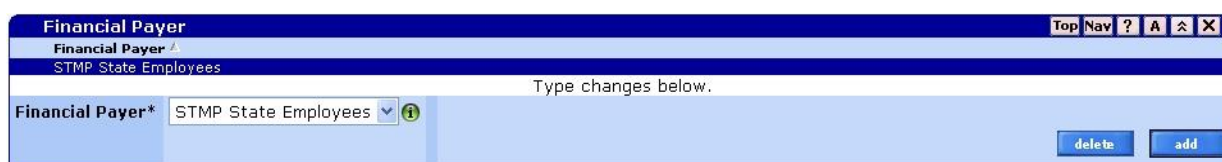
6.77.1 Audit Restriction-Financial Payer-Error Disposition Panel Narrative

The Financial Payer-Audit Restriction panel is a listing of Financial Payers that should be included or excluded from audit criteria.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Financial Payer (only available if Financial Payer on Audit Criteria Base is "Include" or "Exclude")]

6.77.2 Audit Restriction-Financial Payer-Error Disposition Panel Layout



6.77.3 Audit Restriction-Financial Payer-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a financial payer restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete a financial payer restriction from the audit.	Button	N/A	0
Financial Payer	Business code value/description used to identify the payer.	Combo Box	Drop Down List Box	0

6.77.4 Audit Restriction-Financial Payer-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Financial Payer	Field	1	A valid Financial Payer is required.	Select a Financial Payer.
	Field	2	Financial Payer is a duplicate.	Select a unique Financial Payer.

6.77.5 Audit Restriction-Financial Payer-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.77.6 Audit Restriction-Financial Payer-Error Disposition Panel Accessibility

6.77.6.1 To Access the Audit Restriction-Financial Payer-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Financial Payer . Note: Only available if Financial Payer on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- Financial Payer - Disposition Panel Accessibility information panel displays.

6.77.6.2 To Add on the Audit Restriction-Financial Payer-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Financial Payer from drop down list box.	
3	Click Save .	Audit Restriction- Financial Payer - Disposition information is saved.

6.77.6.3 To Update on the Audit Restriction-Financial Payer-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction- Financial Payer - Disposition information is saved.

6.77.6.4 To Delete on the Audit Restriction- Financial Payer-Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.78 Audit Restriction-GCN Sequence-Error Disposition Panel

6.78.1 Audit Restriction-GCN Sequence-Error Disposition Panel Narrative

The GCN Sequence Number-Audit Restriction panel is used to maintain GCN Sequence Number restrictions for an audit.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [GCN Sequence (only available if GCN Sequence Number on Audit Criteria Base is "Include" or "Exclude")]

6.78.2 Audit Restriction-GCN Sequence-Error Disposition Panel Layout



6.78.3 Audit Restriction-GCN Sequence-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a GCN Sequence restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete a GCN Sequence restriction from the audit.	Button	N/A	0
GCN Sequence From [Search]	Beginning GCN Sequence Number of the GCN Sequence Number range for an audit. The Generic Code Number Sequence Number of a drug that represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Hyperlink	N/A	0
GCN Sequence To [Search]	Ending GCN Sequence Number of the GCN Sequence Number range for an audit. The Generic Code Number Sequence Number of a drug that represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Hyperlink	N/A	0

6.78.4 Audit Restriction-GCN Sequence-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
GCN Sequence From	Hyperlink	1	A valid GCN Sequence From is required.	Select the beginning GCN Sequence.
	Hyperlink	2	GCN Sequence To must be greater than or equal to GCN Sequence From.	Select a different GCN Sequence From.
	Hyperlink	3	GCN Sequence Numbers can not overlap.	Check against data list. Range cannot overlap.
GCN Sequence To	Hyperlink	1	A valid GCN Sequence To is required.	Select ending GCN Sequence.
	Hyperlink	2	GCN Sequence To must be greater than or equal to GCN Sequence From.	Select a different GCN Sequence To.
	Hyperlink	3	GCN Sequence Numbers can not overlap.	Check against data list. Range cannot overlap.

6.78.5 Audit Restriction-GCN Sequence-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.78.6 Audit Restriction-GCN Sequence-Error Disposition Panel Accessibility

6.78.6.1 To Access the Audit Restriction- GCN Sequence-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click GCN Sequence . Note: Only available if GCN Sequence Number on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- GCN Sequence - Disposition Panel Accessibility information panel displays.

6.78.6.2 To Add on the Audit Restriction-GCN Sequence-Disposition Panel

Step	Action	Response
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Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select GCN Sequence From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	GCN Sequence From information is displayed on panel.
4	Select GCN Sequence To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	GCN Sequence To is displayed on panel.
6	Click Save .	Audit Restriction- GCN Sequence - Disposition information is saved.

6.78.6.3 To Update on the Audit Restriction-GCN Sequence-Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction- GCN Sequence - Disposition information is saved.

6.78.6.4 To Delete on the Audit Restriction- GCN Sequence-Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.79 Audit Restriction-GPI-Error Disposition Panel

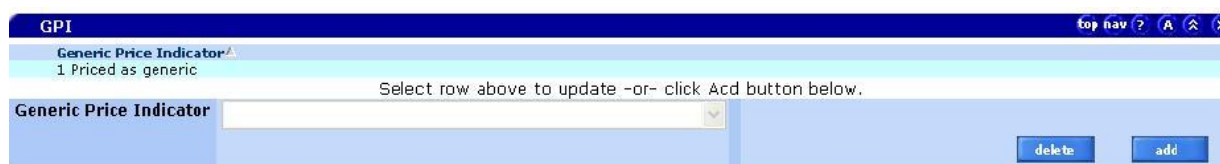
6.79.1 Audit Restriction-GPI-Error Disposition Panel Narrative

The GPI-Audit Restriction panel is used to maintain Generic Price Indicator restrictions for an audit.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [GPI (only available if Generic Price on Audit Criteria Base is "Include" or "Exclude")]

6.79.2 Audit Restriction-GPI-Error Disposition Panel Layout



6.79.3 Audit Restriction-GPI-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a GPI Restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete a GPI Restriction from the audit.	Button	N/A	0
Generic Price Indicator	Generic Price Indicator (GPI) code and the description that is to be included/excluded in the audit.	Combo Box	Drop Down List Box	0

6.79.4 Audit Restriction-GPI-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Generic Price Indicator	Field	1	Generic Price Indicator is required.	Select a Generic Price Indicator.
	Field	2	Generic Price Indicator is a duplicate.	Select unique Generic Price Indicator.

6.79.5 Audit Restriction-GPI-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.79.6 Audit Restriction-GPI-Error Disposition Panel Accessibility

6.79.6.1 To Access the Audit Restriction- GPI-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click GPI . Note: Only available if Generic Price on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- GPI-Error Disposition Panel Accessibility information panel displays.

6.79.6.2 To Add on the Audit Restriction- GPI-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
5	Select Generic Price Indicator from drop down list box.	
6	Click Save .	Audit Restriction-GPI-Error Disposition information is saved.

6.79.6.3 To Update on the Audit Restriction- GPI- Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-GPI-Error Disposition information is saved.

6.79.6.4 To Delete on the Audit Restriction- GPI- Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.80 Audit Restriction-HICL-Error Disposition Panel

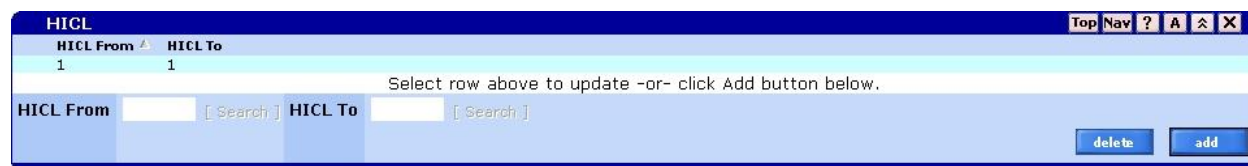
6.80.1 Audit Restriction-HICL-Error Disposition Panel Narrative

The HICL –Audit Restriction panel is used to maintain HICL restrictions for an audit.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [HICL (only available if HICL on Audit Criteria Base is "Include" or "Exclude")]

6.80.2 Audit Restriction-HICL-Error Disposition Panel Layout



6.80.3 Audit Restriction-HICL-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows a user to add a HICL Restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete a HICL Restriction from the audit.	Button	N/A	0
HICL From	Beginning value for a range of HICL sequence codes to be included/excluded in the audit.	Hyperlink	N/A	0
HICL To	Ending value for a range of HICL sequence codes to be included/excluded in the audit.	Hyperlink	N/A	0

6.80.4 Audit Restriction-HICL-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
HICL From	Hyperlink	1	A valid HICL From is required.	Select a valid HICL From value.
	Hyperlink	2	From HICL value must be less than or equal to HICL To value.	Enter a HICL From value that is less than or equal to HICL To value.
	Hyperlink	3	HICL range segments can not overlap.	Correct overlap condition. The HICL segment cannot overlap.
HICL To	Hyperlink	1	A valid HICL To is required.	Select a valid HICL To value.

6.80.5 Audit Restriction-HICL-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.80.6 Audit Restriction-HICL-Error Disposition Panel Accessibility

6.80.6.1 To Access the Audit Restriction-HICL-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click HICL . Note: Only available if HICL on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction- HICL-Error Disposition Panel Accessibility information panel displays.

6.80.6.2 To Add on the Audit Restriction-HICL-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select HICL From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	HICL From information is displayed on panel.
4	Select HICL To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	HICL To is displayed on panel.
6	Click Save .	Audit Restriction- HICL Error Disposition information is saved.

6.80.6.3 To Update on the Audit Restriction-HICL-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	

Step	Action	Response
3	Click Save .	Audit Restriction- HICL -Error Disposition information is saved.

6.80.6.4 To Delete on the Audit Restriction-HICL-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.81 Audit Restriction-NDC-Error Disposition Panel

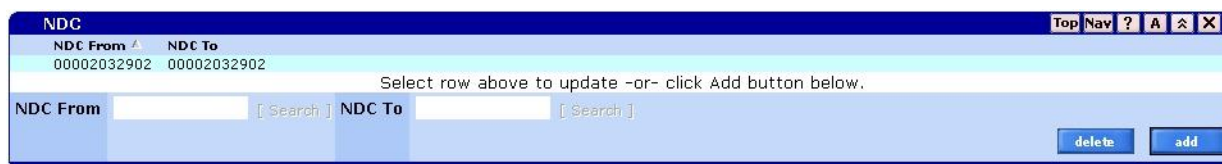
6.81.1 Audit Restriction-NDC-Error Disposition Panel Narrative

The NDC-Audit Restriction panel is used to maintain NDC restrictions for an audit.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [NDC (only available if NDC on Audit Criteria Base is "Include" or "Exclude")]

6.81.2 Audit Restriction-NDC-Error Disposition Panel Layout



6.81.3 Audit Restriction-NDC-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add an NDC Restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete an NDC Restriction from the audit.	Button	N/A	0
NDC From [Search]	Beginning NDC for a range of NDCs to be included/excluded in the audit. This code identifies a specific drug.	Hyperlink	N/A	0
NDC To [Search]	Ending NDC for a range of NDCs to be included/excluded in the audit. This code identifies a specific drug.	Hyperlink	N/A	0

6.81.4 Audit Restriction-NDC-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
NDC From	Hyperlink	1	A valid NDC From is required.	Select a valid NDC From value.
	Hyperlink	2	NDC From value must be less than or equal to NDC To value.	Select a NDC From value that is less than or equal to the NDC To value.
	Hyperlink	3	NDC range segments can not overlap.	Verify the NDC range segments to determine where the overlap is occurring and then change the segments to avoid the overlapping of NDC code ranges.
NDC To	Hyperlink	1	A valid NDC To is required.	Select a valid NDC To value.

6.81.5 Audit Restriction-NDC-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.81.6 Audit Restriction-NDC-Error Disposition Panel Accessibility

6.81.6.1 To Access the Audit Restriction-NDC-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click NDC . Note: Only available if NDC on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction-NDC-Error Disposition Panel Accessibility information panel displays.

6.81.6.2 To Add on the Audit Restriction-NDC-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select NDC From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	NDC From information is displayed on panel.
4	Select NDC To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	NDC To is displayed on panel.
6	Click Save .	Audit Restriction-NDC Error Disposition information is saved.

6.81.6.3 To Update on the Audit Restriction-NDC-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-NDC-Error Disposition

Step	Action	Response
		information is saved.

6.81.6.4 To Delete on the Audit Restriction-NDC-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.82 Audit Restriction-Procedure (POS)-Error Disposition Panel

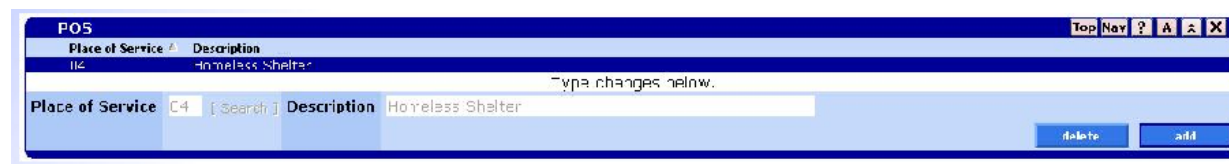
6.82.1 Audit Restriction-Procedure (POS)-Error Disposition Panel Narrative

The Audit Restrictions – POS panel is used to update places of service restrictions which are applicable to the error code. For example, if a limit audit applies only to services provided in the hospital, then the hospital place of service value would be entered, and displayed.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition] [Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [(Expand Error Disposition on left by clicking +)] - [Audit Restriction] - [POS (only available if Place of Service on Audit Criteria Base is "Include" or "Exclude")]

6.82.2 Audit Restriction-Procedure (POS)-Error Disposition Panel Layout



6.82.3 Audit Restriction-Procedure (POS)-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new Place of Service Restriction to the limit audit.	Button	N/A	0
Delete	Allows the user to delete a Place of Service restriction from the limit audit.	Button	N/A	0
Description	Text description of the POS code.	Field	Character	50
Place of Service [Search]	Place of Service (POS) code which indicates the place of service to which this error code is limited.	Hyperlink	N/A	0

6.82.4 Audit Restriction-Procedure (POS)-Error Disposition Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
Place of Service	Hyperlink	1	A valid Place Of Service is required.	Select a valid Place of Service.
		2	Place Of Service code is a duplicate.	Place of Service restriction already exists. Select a unique Place of Service.

6.82.5 Audit Restriction-Procedure (POS)-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.82.6 Audit Restriction-Procedure (POS)-Error Disposition Panel Accessibility

6.82.6.1 To Access the Audit Restriction-(POS)-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click POS . Note: Only available if POS on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction-POS-Error Disposition Panel Accessibility information panel displays.

6.82.6.2 To Add on the Audit Restriction-POS-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select NDC From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	NDC From information is displayed on panel.
4	Select NDC To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	NDC To is displayed on panel.
6	Click Save .	Audit Restriction-(POS) Error Disposition information is saved.

6.82.6.3 To Update on the Audit Restriction-(POS)-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction-(POS)-Error Disposition information is saved.

6.82.6.4 To Delete on the Audit Restriction-(POS)-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

Audit Restriction-Procedure (Contra)-Error Disposition Panel

5.75.1 Audit Restriction-Procedure (Contra)-Error Disposition Panel Narrative

The Audit Procedure Restriction - Contra panel is used to maintain Procedure Codes and their modifiers or revenue codes that should be included when performing Contra-Indicated audits.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Procedure (only available if Procedure on Audit Criteria Base is "Include" or "Exclude" and Audit Type is Contra-indicated)]

5.75.2 Audit Restriction-Procedure (Contra)-Error Disposition Panel Layout

Procedure [Search] search clear

Current Code Type	Current Code From	Current Code To	Current Modifier	History Code Type	History Code From	History Code To	History Modifier	Current Procedure Group Type	History Procedure Group Type
Procedure	99281	99285	**	Procedure	90471	90471	**		
Procedure	99281	99285	**	Procedure	90736	90736	**		
Procedure	99281	99285	**	Procedure	90760	90761	**		
Procedure	99281	99285	**	Procedure	90765	90776	**		
Procedure	99281	99285	**	Procedure	90779	90779	**		
Procedure	99281	99288	**	Procedure	90780	90788	**		
Procedure	99281	99285	**	Procedure	96401	96417	**		
Procedure	99281	99285	**	Procedure	96420	96425	**		
Procedure	99281	99285	**	Procedure	96440	96549	**		
Procedure	99281	99285	**	Procedure	G0345	G0363	**		

1 2 3 4 5 Next >

Select row above to update -or- click Add button below.

Current Code Type: Procedure History Code Type: Procedure

Current Code From: [Search] History Code From: [Search]

Current Code To: [Search] History Code To: [Search]

Current Modifier: [Search] History Modifier: [Search]

Current Procedure Group Type: [Search] History Procedure Group Type: [Search]

Delete add

5.75.3 Audit Restriction-Procedure (Contra)-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new Procedure Restriction to the audit.	Button	N/A	0
Clear	Allows user to clear Procedure Code text box.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
Current Code From [Search]	Related to the current claim, it is the first Procedure Code/revenue code in a range of Procedure Codes/revenue codes used to define audit criteria.	Hyperlink	N/A	0
Current Code To [Search]	Related to the current claim, it is the last Procedure Code/revenue code in a range of Procedure Codes/revenue codes used to define audit criteria.	Hyperlink	N/A	0
Current Code Type	Service Type - Procedure or Revenue.	Combo Box	Drop Down List Box	0
Current Modifier	The modifier that applies to the current Procedure Code range. Only valid if added with a Procedure Code range.	Field	Character	2
Delete	Remove a procedure Restriction from the audit.	Button	N/A	0
History Code From [Search]	Related to the claim in history, it is the first Procedure Code/revenue code in a range of Procedure Codes/revenue codes used to define audit the criteria.	Hyperlink	N/A	0
History Code To [Search]	Related to the claim in history, it is the last Procedure Code/revenue code in a range of Procedure Codes/revenue codes used to define audit the criteria.	Hyperlink	N/A	0
History Code Type	Service Type - Procedure or Revenue.	Combo Box	Drop Down List Box	0
History Modifier	The modifier that applies to the history Procedure Code range. Only valid if added with a Procedure Code range.	Field	Character	2
Procedure	Allows user to search for procedures from procedure search panel.	Field	Character	6
Search	Allows user to search records on Audit Restriction –Procedure (Contra) Procedure panel.	Button	N/A	0

5.75.4 Audit Restriction-Procedure (Contra)-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
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Field	Field Type	Error Code	Error Message	To Correct
Current Code From	Hyperlink	1	A valid Current From Code is required.	Select a procedure or Revenue code.
	Hyperlink	2	From Code is greater than To Code.	Verify Keying. From Code (Revenue or Procedure) should not be greater than To code.
	Hyperlink	3	Code range segments can not overlap.	Verify Keying. Code should not overlap existing segments.
Current Code To	Hyperlink	1	A valid Current To Code is required.	Select a procedure or Revenue code.
	Hyperlink	2	From Code is greater than To Code.	Verify Keying. To Code (Revenue or Procedure) should not be less than From code.
	Hyperlink	3	Code range segments can not overlap.	Verify Keying. Code should not overlap existing segments.
History Code From	Hyperlink	1	A valid History From Code is required.	Select a Procedure or Revenue code.
	Hyperlink	2	From Code is greater than To Code.	Verify Keying. From Code (Revenue or Procedure) should not be greater than To code.
History Code To	Hyperlink	1	A valid History To Code is required.	Select a Procedure or Revenue code.
	Hyperlink	2	From Code is greater than To Code.	Verify Keying. To Code (Revenue or Procedure) should not be less than From code.

5.75.5 Audit Restriction-Procedure (Contra)-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

5.75.6 Audit Restriction-Procedure (Contra) Error Disposition Panel Accessibility

5.75.6.1 To Access the Audit Restriction (Contra) Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.

Step	Action	Response
5	Click Procedure . Note: Only available if Procedure on Audit Criteria Base is "Include" or "Exclude" and Audit Type is Contra-indicated.	Audit Restriction (Contra) Error Disposition Panel Accessibility information panel displays.

5.75.6.2 To Add on the Audit Restriction (Contra) Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Current Code Type from the drop down list box.	
3	Select Current Code From by clicking [Search] button.	
4	Enter search criteria. User may also select a row from the list of search results.	Current Code From is displayed on panel.
5	Select Current Code To by clicking [Search] button.	
6	Enter search criteria. User may also select a row from the list of search results.	Current Code To is displayed on panel.
7	Select Current Modifier by clicking [Search] button.	
8	Enter search criteria. User may also select a row from the list of search results.	Current Modifier is displayed on panel.
9	Select History Code Type from drop down list box.	
10	Select History Code From by clicking [Search] button.	
11	Enter search criteria. User may also select a row from the list of search results.	History Code From is displayed on panel.
12	Select History Code To by clicking [Search] button.	
13	Enter search criteria. User may also select a row from the list of search results.	History Code To is displayed on panel.
14	Select History Modifier by clicking [Search] button.	
15	Enter search criteria. User may also select a row from the list of	History Modifier is displayed on panel.

Step	Action	Response
	search results.	
16	Click Save .	Audit Restriction (Contra) Error Disposition information is saved.

5.75.6.3 To Update on the Audit Restriction (Contra) Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction (Contra)Error Disposition information is saved.

5.75.6.4 To Delete on the Audit Restriction (Contra) Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

5.76 Audit Restriction-Procedure-Error Disposition Panel

5.76.1 Audit Restriction-Procedure-Error Disposition Panel Narrative

The Audit Restrictions - Procedure panel is used to maintain Procedure Codes to be included in the audit criteria. This panel is for all audits except Contra Audits. Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Procedure (only available if Procedure on Audit Criteria Base is "Include" or "Exclude")]

5.76.2 Audit Restriction-Procedure-Error Disposition Panel Layout

Procedure From	Procedure To	Modifier	Conversion Factor	Procedure Group Type
10021	69990	59	1.00	
70010	79999	59	1.05	
80048	89356	59	1.00	
A9700	A9700	59	1.00	
C9129	C9129	59	1.00	
A4644	A4646	59	1.00	
C9226	C9226	59	1.00	
G0345	G0363	59	1.00	
J0120	J0120	59	1.20	
J0128	J0128	59	1.00	

5.76.3 Audit Restriction-Procedure-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new procedure restriction to the audit.	Button	N/A	0
Clear	Allows user to clear procedure text box.	Button	N/A	0
Conversion Factor	Conversion factor to be applied when codes being audited are measured in different increments to allow units to be counted toward limitations on an equal basis.	Field	Number (Decimal)	5
Delete	Allows the user to delete a procedure restriction from the audit.	Button	N/A	0
Modifier [Search]	Further specifies what type of Procedure Codes should be included in an audit. This code applies to both the beginning and ending procedures in the range.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Procedure From [Search]	First Procedure Code in a range of codes to be included/excluded in the audit.	Hyperlink	N/A	0
Procedure Group Type	Unique system assigned key for the Procedure Group. Represents a collection of Procedures.	Field	Number (Integer)	9
Procedure To [Search]	Last Procedure Code in a range of codes to be included/excluded in the audit.	Hyperlink	N/A	0
Procedure [Search]	List of procedure codes.	Field	Character	6
Search	Allows user to search records from the panel.	Button	N/A	0

5.76.4 Audit Restriction-Procedure-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Conversion Factor	Field	0	Conversion Factor must be greater than or equal to 0.00.	Enter a valid Conversion Factor value.
	Field	1	Conversion Factor must be less than or equal to 999.99.	Enter a valid Conversion Factor value.
	Field	2	Conversion Factor is required.	Enter a valid Conversion Factor value.
Modifier	Hyperlink	1	A valid Modifier is required.	Select a modifier.
Procedure From	Hyperlink	1	Procedure From is greater than To Procedure.	Procedure To code should be greater than or equal to Procedure From code.
	Hyperlink	2	A valid Procedure From is required.	Select a Procedure From.
	Hyperlink	3	Procedure range segments can not overlap.	Procedure code ranges cannot overlap. Please re-key.
Procedure To	Hyperlink	1	Procedure From is greater than Procedure To.	Procedure To should be greater than or equal to Procedure From.
	Hyperlink	2	A valid Procedure To is required.	Select a Procedure To.
	Hyperlink	3	Procedure Range segments can not overlap.	Procedure cCde ranges cannot overlap. Please re-key.

5.76.5 Audit Restriction-Procedure-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

5.76.6 Audit Restriction-Procedure-Error Disposition Panel Accessibility

5.76.6.1 To Access the Audit Restriction Procedure-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Procedure . Note: Only available if Procedure on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Procedure-Error Disposition Panel Accessibility information panel displays.

5.76.6.2 To Add on the Audit Restriction Procedure-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Provider From by clicking [Search] button.	
3	Enter search criteria. User may also select a row from the list of search results.	Provider From is displayed on panel.
4	Select Provider To by clicking [Search] button.	
5	Enter search criteria. User may also select a row from the list of search results.	Provider To is displayed on panel.
6	Select Modifier by clicking [Search] button.	
7	Enter search criteria. User may also select a row from the list of search results.	Modifier is displayed on panel.
8	Enter Conversion Factor .	
9	Click Save .	Audit Restriction Procedure-Error Disposition information is saved.

5.76.6.3 To Update on the Audit Restriction Procedure-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Procedure-Error Disposition information is saved.

5.76.6.4 To Delete on the Audit Restriction Procedure-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.83 Audit Restriction-Provider Specialty-Error Disposition Panel

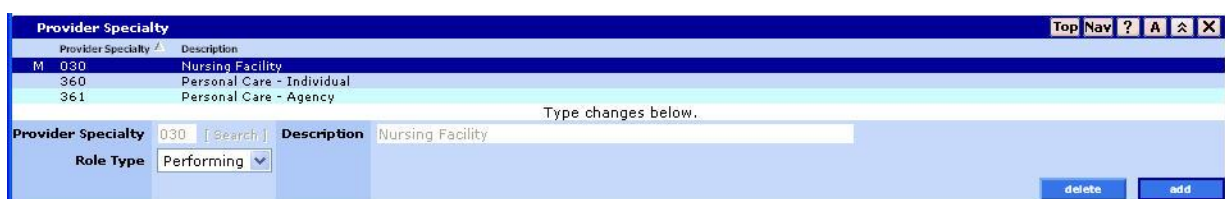
6.83.1 Audit Restriction-Provider Specialty-Error Disposition Panel Narrative

The Audit Provider Specialty Restrictions panel is used to add provider specialties to be included in or excluded from the audit criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Provider Specialty (only available if Provider Specialty on Audit Criteria Base is "Include" or "Exclude")]

6.83.2 Audit Restriction-Provider Specialty-Error Disposition Panel Layout



6.83.3 Audit Restriction-Provider Specialty-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a Provider Specialty Restriction to the audit.	Button	N/A	0
Delete	Remove a Provider Specialty Restriction from the audit.	Button	N/A	0
Description	Read Only description of the provider specialty included/excluded in the audit.	Field	Character	50
Role Type	Indicate the role of provider specialty. Allowed values are space, P (Performing), B (Billing) and A (All).	Combo Box	Drop Down List Box	0
Provider Specialty [Search]	Provider Specialty Code to be included/excluded in the audit.	Hyperlink	N/A	0

6.83.4 Audit Restriction-Provider Specialty-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Provider Specialty [Search]	Hyperlink	1	A valid Provider Specialty is required.	Select a unique provider specialty.
	Hyperlink	2	Provider Specialty is a duplicate.	Restriction for this Provider Specialty already exists. Select a unique provider specialty.
Role Type	Field	3	Role Type is required.	Select a Role Type from the list.

6.83.5 Audit Restriction-Provider Specialty-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.83.6 Audit Restriction-Provider Specialty-Error Disposition Panel Accessibility

6.83.6.1 To Access the Audit Restriction Provider Specialty-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Provider Specialty . Note: Only available if Provider Specialty on Audit Criteria Base is "Include" or "Exclude"	Audit Restriction Provider Specialty-Error Disposition panel displays.

6.83.6.2 To Add on the Audit Restriction Provider Specialty-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Provider Specialty by clicking [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Provider Specialty is displayed on panel.

Step	Action	Response
4	Select Role Type from the drop down list box.	
5	Enter Description .	
6	Click Save .	Audit Restriction Provider Specialty-Error Disposition information is saved.

6.83.6.3 To Update on the Audit Restriction Provider Specialty-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Provider Specialty-Error Disposition information is saved.

6.83.6.4 To Delete on the Audit Restriction Provider Specialty-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.84 Audit Restriction-Provider Type-Error Disposition Panel

6.84.1 Audit Restriction-Provider Type-Error Disposition Panel Narrative

The Audit Provider Type Restrictions panel is used to add provider types to be included in or excluded from the audit criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Provider Type (only available if Provider Type on Audit Criteria Base is "Include" or "Exclude")]

6.84.2 Audit Restriction-Provider Type-Error Disposition Panel Layout

6.84.3 Audit Restriction-Provider Type-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add new Provider Type Restriction to the audit.	Button	N/A	0
Delete	Remove a Provider Type Restriction from the audit.	Button	N/A	0
Description	Read Only description of the provider type included/excluded in the audit.	Field	Character	50
Role Type	Indicate the role of provider type. Allowed values are space, P (Performing), B (Billing) and A (All).	Combo Box	Drop Down List Box	0
Provider Type[Search]	Provider type to be included/excluded in the audit.	Hyperlink	N/A	0

6.84.4 Audit Restriction-Provider Type-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Provider Type	Hyperlink	1	A valid Provider Type Code is required.	Select a valid provider type.
	Hyperlink	2	Provider Type is a duplicate.	Selected provider type is already restricted. Make sure that the provider type is unique.
Role Type	Field	3	Role Type is required.	Select a Role Type from the list.

6.84.5 Audit Restriction-Provider Type-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.84.6 Audit Restriction-Provider Type-Error Disposition Panel Accessibility

6.84.6.1 To Access the Audit Restriction Provider Type-Error Disposition Panel Accessibility

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Provider Type . Note: Only available if Provider Type on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Provider Type-Error Disposition panel displays.

6.84.6.2 To Add on the Audit Restriction Provider Type-Error Disposition Panel Accessibility

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Provider Type by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Provider Type is displayed on panel.
4	Select Role Type from the drop down list box.	
5	Enter Description .	
6	Click Save .	Audit Restriction Provider Type-Error Disposition information is saved.

6.84.6.3 To Update on the Audit Restriction Provider Type-Error Disposition Panel Accessibility

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.

Step	Action	Response
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Provider Type-Error Disposition information is saved.

6.84.6.4 To Delete on the Audit Restriction Provider Type-Error Disposition Panel Accessibility

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.85 Audit Restriction-Recipient Plan-Error Disposition Panel

6.85.1 Audit Restriction-Recipient Plan-Error Disposition Panel Narrative

The Audit Recipient Plan Restrictions panel is used to identify which coverage programs are to be included in or excluded from the audit criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] – [Audit Restriction] - [Recipient Plan (only available if Recipient Plan on Audit Criteria Base is "Include" or "Exclude")]

6.85.2 Audit Restriction-Recipient Plan-Error Disposition Panel Layout



6.85.3 Audit Restriction-Recipient Plan-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a new Recipient Plan Restriction to the audit.	Button	N/A	0
Delete	Allows the user to delete a Recipient Plan Restriction from the audit.	Button	N/A	0
Recipient Plan	Recipient plan that is to be included/excluded in the audit.	Combo Box	Drop Down List Box	0

6.85.4 Audit Restriction-Recipient Plan-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Recipient Plan	Field	1	Duplicate Recipient Plan found. Recipient Plan is a duplicate.	Select a unique Recipient Plan
	Field	2	A valid Recipient Plan is required.	Select a Recipient Plan from the drop down list.

6.85.5 Audit Restriction-Recipient Plan-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.85.6 Audit Restriction-Recipient Plan-Error Disposition Panel Accessibility

6.85.6.1 To Access the Audit Restriction Recipient Plan-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Recipient Plan . Note: Only available if Recipient Plan on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Recipient Plan-Error Disposition panel displays.

6.85.6.2 To Add on the Audit Restriction Recipient Plan-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Recipient Plan from the drop down list box.	
3	Click Save .	Audit Restriction Recipient Plan-Error Disposition information is saved.

6.85.6.3 To Update on the Audit Restriction-Recipient Plan-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Recipient Plan-Error Disposition information is saved.

6.85.6.4 To Delete on the Audit Restriction Recipient Plan-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.86 Audit Restriction-Revenue Code-Error Disposition Panel

6.86.1 Audit Restriction-Revenue Code-Error Disposition Panel Narrative

The Revenue Code-Audit Restriction panel is used to add revenue codes that are included in or excluded from audit criteria. Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Revenue Code (only available if Revenue Code on Audit Criteria Base is "Include" or "Exclude")]

6.86.2 Audit Restriction-Revenue Code-Error Disposition Panel Layout

6.86.3 Audit Restriction-Revenue Code-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new Revenue Code Restriction to the audit.	Button	N/A	0
Delete	Remove a Revenue Code Restriction from the audit.	Button	N/A	0
Revenue From [Search]	The first revenue code in a range of revenue codes included/excluded in the auditing criteria.	Hyperlink	N/A	0
Revenue To [Search]	The last revenue code in a range of revenue codes included/excluded in the auditing criteria.	Hyperlink	N/A	0

6.86.4 Audit Restriction-Revenue Code-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Revenue From	Hyperlink	1	A valid Revenue From is required.	Select a Revenue Code.
	Hyperlink	3	Revenue range segments can not overlap.	Verify against list. Revenue code ranges can not overlap. Correct overlapping ranges.
	Hyperlink	8181	Revenue From is greater than Revenue To.	Revenue From must be less than Revenue To.
Revenue To	Hyperlink	1	A valid Revenue To is required.	Revenue To must be less than Revenue From.

	Hyperlink	3	Revenue range segments can not overlap.	Verify against list. Revenue code ranges can not overlap. Correct overlapping ranges.
	Hyperlink	8181	Revenue From is greater than Revenue To.	Revenue To must be greater than or equal to Revenue From.

6.86.5 Audit Restriction-Revenue Code-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.86.6 Audit Restriction-Revenue Code-Error Disposition Panel Accessibility

6.86.6.1 To Access the Audit Restriction Revenue Code-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Revenue Code . Note: Only available if Revenue Code on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Revenue Code-Error Disposition panel displays.

6.86.6.2 To Add on the Audit Restriction Revenue Code-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Revenue From by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Revenue From is displayed on panel.
4	Select Revenue To by clicking on [Search].	
5	Enter search criteria. User may also select a row from the list of search results.	Revenue To is displayed on panel.
6	Click Save .	Audit Restriction Revenue Code-Error Disposition

Step	Action	Response
		information is saved.

6.86.6.3 To Update on the Audit Restriction-Revenue Code-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Revenue Code-Error Disposition information is saved.

6.86.6.4 To Delete on the Audit Restriction Revenue Code-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.87 Audit Restriction-Therapeutic Class-Error Disposition Panel

6.87.1 Audit Restriction-Therapeutic Class-Error Disposition Panel Narrative

The Therapeutic Class-Audit Restriction panel lists a range of Specific Therapeutic Classes that should be included or excluded in audit criteria for limitation and umbrella audits.

Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Therapeutic Class (only available if Therapeutic Class on Audit Criteria Base is "Include" or "Exclude")]

6.87.2 Audit Restriction-Therapeutic Class-Error Disposition Panel Layout



6.87.3 Audit Restriction-Therapeutic Class-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new Therapeutic Class Restriction to the audit.	Button	N/A	0
Delete	Remove a Therapeutic Class Restriction from the audit.	Button	N/A	0
Therapeutic Class From [Search]	The start value of Therapeutic Class for a range of therapeutic classes to be included/excluded in the audit.	Hyperlink	N/A	0
Therapeutic Class To [Search]	The end value of Therapeutic Class for a range of therapeutic classes to be included/excluded in the audit.	Hyperlink	N/A	0

6.87.4 Audit Restriction-Therapeutic Class-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Therapeutic Class From [Search]	Hyperlink	1	A valid Therapeutic Class From is required.	Select a valid Therapeutic Class From value.
	Hyperlink	2	Therapeutic Class From must be less than or equal to Therapeutic Class To.	Enter a Therapeutic Class From value that is less than the Therapeutic Class To value.

Field	Field Type	Error Code	Error Message	To Correct
	Hyperlink	3	Therapeutic Class range segments can not overlap.	Enter a Therapeutic Class range that does not overlap an existing Therapeutic Class Range Restriction.
Therapeutic Class To [Search]	Hyperlink	1	A valid Therapeutic Class To is required.	Select a valid Therapeutic Class To value.
	Hyperlink	2	Therapeutic Class From must be less than or equal to Therapeutic Class To.	Enter a Therapeutic Class From value that is less than the Therapeutic Class To value.
	Hyperlink	3	Therapeutic Class range segments can not overlap.	Enter a Therapeutic Class range that does not overlap an existing Therapeutic Class range restriction.

6.87.5 Audit Restriction-Therapeutic Class-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.87.6 Audit Restriction-Therapeutic Class-Error Disposition Panel Accessibility

6.87.6.1 To Access the Audit Restriction Therapeutic Class-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Therapeutic Class . Note: Only available if Therapeutic Class on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Therapeutic Class-Error Disposition panel displays.

6.87.6.2 To Add on the Audit Restriction Therapeutic Class-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Therapeutic Class From by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Therapeutic Class From is displayed on panel.
4	Select Therapeutic Class To by clicking on [Search].	
5	Enter search criteria. User may also select a row from the list of search results.	Therapeutic Class To is displayed on panel.
6	Click Save .	Audit Restriction Therapeutic Class-Error Disposition information is saved.

6.87.6.3 To Update on the Audit Restriction- Therapeutic Class-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Therapeutic Class-Error Disposition information is saved.

6.87.6.4 To Delete on the Audit Restriction Therapeutic Class-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.88 Audit Restriction-Tooth Number-Error Disposition Panel

6.88.1 Audit Restriction-Tooth Number-Error Disposition Panel Narrative

The Audit Tooth Number Restrictions panel is used to add Tooth Number to be included in or excluded from the audit criteria.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [Audit Restriction] - [Tooth Number (only available if Tooth Number on Audit Criteria Base is "Include" or "Exclude")]

6.88.2 Audit Restriction-Tooth Number-Error Disposition Panel Layout



6.88.3 Audit Restriction-Tooth Number-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a Tooth Number Restriction to the audit.	Button	N/A	0
Delete	Remove a Tooth Number Restriction from the audit.	Button	N/A	0
Description	Read Only description of the provider specialty included/excluded in the audit.	Field	Character	0
Tooth Number [Search]	Tooth Number Code to be included/excluded in the audit.	Hyperlink	N/A	0

6.88.4 Audit Restriction-Tooth Number-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.88.5 Audit Restriction-Tooth Number-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.88.6 Audit Restriction-Tooth Number-Error Disposition Panel Accessibility

6.88.6.1 To Access the Audit Restriction Tooth Number-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Tooth Number . Note: Only available if Tooth Number on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Tooth Number-Error Disposition panel displays.

6.88.6.2 To Add on the Audit Restriction Tooth Number-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Tooth Number by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Tooth Number is displayed on panel.
4	Enter Description .	
5	Click Save .	Audit Restriction Tooth Number-Error Disposition

6.88.6.3 To Update on the Audit Restriction- Tooth Number-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Tooth Number Error Disposition information is saved.

6.88.6.4 To Delete on the Audit Restriction Tooth Number-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

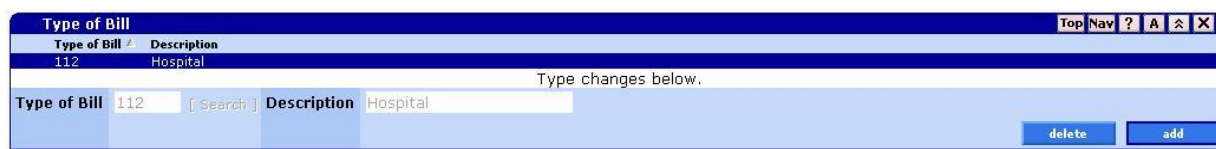
6.89 Audit Restriction-Type of Bill-Error Disposition Panel

6.89.1 Audit Restriction-Type of Bill-Error Disposition Panel Narrative

The Type of Bill-Audit Restriction panel is used to maintain type of bill restrictions for an audit. Only users with authorized access are allowed to perform maintenance tasks.

Navigation Path: [Reference - Error Disposition Search] - [(Add button) OR (click on 'search', select row from search results)] - [Error Disposition Maintenance] - [(Expand Error Disposition on left by clicking +)] - [Audit Restriction] - [Type of Bill (only available if Type of Bill on Audit Criteria Base is "Include" or "Exclude")]

6.89.2 Audit Restriction-Type of Bill-Error Disposition Panel Layout



6.89.3 Audit Restriction-Type of Bill-Error Disposition Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a new Type of Bill Restriction to the audit.	Button	N/A	0
Delete	Remove a Type of Bill Restriction from the audit.	Button	N/A	0
Description	Read Only Description of Type of Bill.	Field	Character	20
Type of Bill [Search]	Code that identifies a particular bill type, to be included/excluded in the audit.	Hyperlink	N/A	0

6.89.4 Audit Restriction-Type of Bill-Error Disposition Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Type of Bill [Search]	Hyperlink	1	A valid Type Of Bill is required.	Select a Type of Bill.
	Hyperlink	2	Type of Bill Code is a duplicate.	Type of Bill Restriction already exists. Select a unique Type of Bill Code.

6.89.5 Audit Restriction-Type of Bill-Error Disposition Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.89.6 Audit Restriction-Type of Bill-Error Disposition Panel Accessibility

6.89.6.1 To Access the Audit Restriction Type of Bill-Error Disposition Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Error Disposition .	Reference Error Disposition Search panel displays.
3	Click Add .	Reference Error Disposition Information and Maintenance panels displays.
4	Click Audit Restriction .	Audit Restriction page displays.
5	Click Type of Bill . Note: Only available if Type of Bill on Audit Criteria Base is "Include" or "Exclude".	Audit Restriction Type of Bill-Error Disposition panel displays.

6.89.6.2 To Add on the Audit Restriction Type of Bill-Error Disposition Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Type of Bill by clicking on [Search].	
3	Enter search criteria. User may also select a row from the list of search results.	Type of Bill is displayed on panel.
4	Enter Description .	
5	Click Save .	Audit Restriction Type of Bill-Error Disposition information is saved.

6.89.6.3 To Update on the Audit Restriction-Type of Bill-Error Disposition Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Audit Restriction Type of Bill-Error Disposition information is saved.

6.89.6.4 To Delete on the Audit Restriction Type of Bill-Error Disposition Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.90 Reference Modifier Search-Modifier Panel

6.90.1 Reference Modifier Search-Modifier Panel Narrative

The Reference Modifier Search panel allows the user to search for a specific Modifier code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Modifier] - [search button]

6.90.2 Reference Modifier Search-Modifier Panel Layout

6.90.3 Reference Modifier Search-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Opens all necessary panels to allow the user to enter data and create a new Procedure Modifier in Interchange.	Button	N/A	0
Clear	Clears the search criteria fields so user may key-in new criteria.	Button	N/A	0
Description	Short text that describes the modifier, used as search criteria in the search.	Field	Character	40
Match Criteria	Allows matching based on whether the description begins with or contains the requested characters.	Combo Box	Radio Button	0
Modifier	A code used to identify a procedure modifier (condition requiring medical attention), used as search criteria in the search.	Field	Character	2
Records	Indicates the number of records to be displayed in search results.	Combo Box	Drop Down List Box	0
Search	Initiates 'search' for a Modifier matching the search criteria keyed-in.	Button	N/A	0
Sounds-Like	If the box is checked, phonetic search is performed and if the check box is unchecked word search is performed.	Combo Box	Check Box	0
Type	Allows searching on the short or the long description.	Combo Box	Radio Button	0

6.90.4 Reference Modifier Search-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
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Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found.	No modifier matching the 'Description' keyed-in was found. Verify input.
Modifier	Field	1	No rows found.	No modifier matching the 'Modifier' code keyed-in was found. Verify Input.

6.90.5 Reference Modifier Search-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.90.6 Reference Modifier Search-Modifier Panel Accessibility

6.90.6.1 To Access the Modifier Search-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.

6.91 Reference Modifier Search Results-Modifier Panel

6.91.1 Reference Modifier Search Results-Modifier Panel Narrative

The Reference Modifier Search Results panel displays modifier records using the criteria from the search panel.

This panel is display only.

Navigation Path: [Reference] - [Modifier (Search)]- (click on [search] button)

6.91.2 Reference Modifier Search Results-Modifier Panel Layout

Search Results				
Modifier	Type	Long Description	Effective Date	End Date
54	Processing	SURGICAL CARE ONLY (SURGERY).	01/01/1990	12/31/2299
58	Processing	STAGED OR RELATED PROCEDURE BY THE SAME PHYSICIAN DURING THE POSTOPERA	01/01/1990	12/31/2299
59	Informational	SERVICE	01/01/1997	12/31/2299
EJ	Informational	SUBSEQUENT CLAIM FOR EPOETIN ALPHA (EPO) INJECTION CLAIMS ONLY	01/01/1990	12/31/2299
Q6	Informational	SERVICES FURNISHED BY A LOCUM TENENS PHYSICIAN	01/01/1990	12/31/2299
QC	Informational	SINGLE CHANNEL CARDIAC MONITORING	01/01/1990	12/31/2299
I	Informational	SITE OF TRANSFER (E.G. AIRPORT OR HELICOPTER PAD	01/01/1964	12/31/2299
S	Informational	SCENE OF ACCIDENT OR ACUTE EVENT	01/01/1964	12/31/2299
QU	Informational	SERVICES PROVIDED IN URBAN HMSA	01/01/1990	12/31/2299
WS	Informational	SAME BATTERY OF TESTS PERFORMED AT DIFFERENT TIMES ON THE SAME DAY	01/01/1990	12/31/2299
GO	Informational	SERVICES DELIVERED UNDER AN OUTPATIENT OCCUPATIONAL THERAPY PLAN OF CA	01/01/1999	12/31/2299
GN	Informational	SERVICES DELIVERED UNDER AN OUTPATIENT SPEECH LANGUAGE PATHOLOGY PLAN	01/01/1999	12/31/2299
SF	Informational	SECOND OPINION ORDERED BY A PROFESSIONAL REVIEW ORGANIZATION(PRO) PER	01/01/1964	12/31/2299
KQ	Informational	SECOND OR SUBSEQUENT DRUG OF A MULTIPLE DRUG UNIT DOSE FORMULATION	01/01/1998	12/31/2299
Y2	Informational	SECOND DIGIT OF LEFT FOOT/HAND	01/01/1990	12/31/2299
Y0	Informational	SERVICES RENDERED IN OUTPATIENT OBSERVATION UNIT	01/01/1990	12/31/2299
YC	Informational	SPECIFIC POLICY CRITERIA HAS BEEN MET	01/01/1990	12/31/2299
X2	Informational	SECOND DIGIT OF RIGHT FOOT/HAND	01/01/1990	12/31/2299
WI	Informational	SHARED INPATIENT MANAGEMENT/ITINERANT SURGERY	01/01/1990	12/31/2299
NI	Informational	SKILLED NURSING FAC/TRANSFER AIRPORT HELI PAD	01/01/1964	12/31/2002

1 2 3 Next >

6.91.3 Reference Modifier Search Results-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Short description of the relevant modifier. This is displayed if "Short" is selected from the "Type" radio buttons	Field	Character	40
Effective Dat	The date the modifier becomes active for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date the modifier is no longer valid for claims processing.	Field	Date (MM/DD/CCYY)	8
Long Description	Long description of the relevant modifier. This is displayed if "Long" is selected from the "Type" radio buttons. For a lengthy description, truncation occurs and only the first 100 characters are displayed.	Field	Alphanumeric	250
Modifier	The modifier code used to describe a procedure.	Field	Character	2
Type	Indicates that usage/type of modifier being referenced.	Field	Character	25

6.91.4 Reference Modifier Search Results-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.91.5 Reference Modifier Search Results-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.91.6 Reference Modifier Search Results-Modifier Panel Accessibility

6.91.6.1 To Access the Reference Modifier Search Results-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search Criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance and Information panels display.

6.92 Modifier Mini Search-Modifier Panel

6.92.1 Modifier Mini Search-Modifier Panel Narrative

The Modifier Mini-Search provides the user with the ability to search for a Modifier from the Modifier Information panel.

This panel is inquiry only.

Navigation Path: [Reference] – [Modifier] - [(select row from search results)]

6.92.2 Modifier Mini Search-Modifier Panel Layout



6.92.3 Modifier Mini Search-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	Takes the user to main Modifier Search panel so user may key in advanced search criteria (Description, phonetic search etc.).	Button	N/A	0
Clear	Clears the 'Modifier' field so user can key-in new data.	Button	N/A	0
Modifier	The modifier code used to describe a procedure, used as search criteria.	Field	Character	2
Search	Initiates search for a Modifier with the Modifier Code keyed-in.	Button	N/A	0

6.92.4 Modifier Mini Search-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Modifier	Field	1	No rows found.	No Modifier records matching the code keyed in were found. Verify Keying.

6.92.5 Modifier Mini Search-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.92.6 Modifier Mini Search-Modifier Panel Accessibility

6.92.6.1 To Access the Modifier Mini Search-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search Criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Mini Search-Modifier panel displays.

6.92.6.2 To Navigate the Modifier Mini-Search-Modifier Panel

Step	Action	Response
1	Click on hyperlink to select an area to add or modify.	Select panel displays.

6.93 Modifier Information-Modifier Panel

6.93.1 Modifier Information-Modifier Panel Narrative

The Modifier Information panel is used to view Modifier Information. This is a 'read-only' panel with no edit capabilities.

This panel is display only.

Navigation Path: [Reference] – [Modifier] - [Search] - [Click on any row provided on the list]

6.93.2 Modifier Information-Modifier Panel Layout

Modifier Information		?	⌵
Modifier	23	Effective Date	07/01/1985
Category	H - HCPCS	End Date	12/31/2299
Type	Processing	CMS Add Date	
Description	UNUSUAL ANESTHESIA	CMS Termination Date	
Long Description	UNUSUAL ANESTHESIA: OCCASIONALLY, A PROCEDURE, WHICH USUALLY REQUIRES EITHER NO ANESTHESIA OR LOCAL ANESTHESIA, BECAUSE OF UNUSUAL CIRCUMSTANCES MUST BE DONE UNDER GENERAL ANESTHESIA. THIS CIRCUMSTANCE MAY BE REPORTED BY ADDING THE MODIFIER -23 TO THE		

6.93.3 Modifier Information-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Category	Indicates whether the modifier is a HCPCS or Ambulance Modifier. Valid values are Ambulance and HCPCS.	Field	Character	1
CMS Add Date	Defined by CMS as the date the HCPCS code was added to the CMS common procedure coding system.	Field	Date (MM/DD/CCYY)	8
CMS Termination Date	Defined by CMS as the last date for which a procedure code may be used by providers.	Field	Date (MM/DD/CCYY)	8
Description	A short text that describes the modifier.	Field	Character	40
Effective Date	The date the modifier becomes active for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date the modifier is no longer valid for claims processing.	Field	Date (MM/DD/CCYY)	8
Long Description	Long Description of the Modifier.	Field	Character	250
Modifier	The modifier code used to describe a procedure.	Field	Character	2
Type	Indicates that usage/type of modifier being referenced.	Field	Character	25

6.93.4 Modifier Information-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.93.5 Modifier Information-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.93.6 Modifier Information-Modifier Panel Accessibility

6.93.6.1 To Access the Modifier Information-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Information panel displays.

6.94 Modifier Maintenance-Modifier Panel

6.94.1 Modifier Maintenance-Modifier Panel Narrative

Modifier Maintenance-Modifier panel links to the modifier information maintenance panels.

This panel is inquiry only.

Navigation Path: [Reference] – [Modifier] - [(Add button) OR (Search button and select row from search results)] - [Modifier Maintenance]

6.94.2 Modifier Maintenance-Modifier Panel Layout

The screenshot shows a web application interface for 'Modifier Maintenance'. The main area is titled 'Select an area to add or modify'. Below this title are three tabs: 'Base Information', 'Group', and 'Modifier to Modifier Restriction'. The 'Base Information' tab is currently selected, displaying a 'Note' field. At the bottom of the interface are three buttons: 'save', 'cancel', and 'new'.

6.94.3 Modifier Maintenance-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Base Information	Link to Base Information panel.	Hyperlink	N/A	0
Cancel	Cancels any/all changes made to any/all panels under this menu.	Button	N/A	0
Group	Link to Group panel.	Hyperlink	N/A	0
Modifier to Modifier Restriction	Link to Modifier to Modifier Restriction panel.	Hyperlink	N/A	0
New	Opens appropriate panels so user may key-in data and add a new Modifier to Interchange.	Button	N/A	0
Note	Link to Note panel.	Hyperlink	N/A	0
Save	Saves any/all changes made to any/all panels under this menu.	Button	N/A	0

6.94.4 Modifier Maintenance-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.94.5 Modifier Maintenance-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.94.6 Modifier Maintenance-Modifier Panel Accessibility

6.94.6.1 To Access the Modifier Maintenance-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance panel displays.

6.95 Base Information-Modifier Panel

6.95.1 Base Information-Modifier Panel Narrative

The Base Information-Modifier panel is used to view or update modifier information. This panel provides the user with the capabilities of having both a long and short description of the modifier when applicable.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Modifier] - [search] - [(select row from search results)] - [Modifier-Maintenance] - [Base Information]

6.95.2 Base Information-Modifier Panel Layout

6.95.3 Base Information-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Amount	Dollar amount used to change the allowed amount for a procedure.	Field	Number (Decimal)	11
CMS Add Date	Date the modifier was added to CMS. Informational and applicable only to HCPCS modifiers.	Field	Date (MM/DD/CCYY)	8
CMS Termination Date	Date the modifier is terminated on CMS. Informational and applicable to HCPCS modifiers only.	Field	Date (MM/DD/CCYY)	
Delete	Marks the current Modifier for deletion from Interchange Databases.	Button	N/A	0
Description	A short text that describes the modifier.	Field	Character	40
Effective Date	The date the modifier becomes active for claims processing.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
End Date	The date the modifier is no longer valid for claims processing.	Field	Date (MM/DD/CCYY)	8
Long Description	Long Description of the Modifier.	Field	Character	4000
Modifier	The modifier code used to describe a procedure.	Field	Character	2
Modifier Category	Indicates whether the modifier is a HCPCS modifier or an Ambulance modifier.	Combo Box	Drop Down List Box	0
Modifier Type	Indicates the usage/type of modifier being referenced.	Combo Box	Drop Down List Box	0
Percent	Percentage amount used to change the allowed amount for a procedure.	Field	Number (Decimal)	7
Quantity	Unit adjustment for units of service field on a detail.	Field	Number (Integer)	4
Rate Effective Date	The date that the percentage and amount for the processing modifier becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
Rate Restriction End Date	The date that the percentage and amount for the processing modifier is no longer in effect.	Field	Date (MM/DD/CCYY)	9

6.95.4 Base Information-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
CMS Add Date	Field	0	Invalid Date.	Enter valid date format.
	Field	1	CMS Add Date must be less than or equal to CMS Termination Date.	Enter a date earlier than CMS Termination Date.
	Field	11	CMS Add Date must be greater than or equal to 01/01/1900.	Enter a date later than 1900.
	Field	101	CMS Add Date is required for HCPCS Modifier.	Enter a valid date in CMS Add Date field.
	Field	111	CMS Add Date must be less than or equal to 12/31/2299.	Enter a date earlier than 12/31/2299.
CMS Termination Date	Field	0	Invalid Date.	Enter valid date format.
	Field	11	CMS Termination Date must be greater than or equal to 01/01/1900.	Enter a date later than 01/01/1900.

Field	Field Type	Error Code	Error Message	To Correct
	Field	111	CMS Termination Date must be less than or equal to 12/31/2299.	Enter a date earlier than 12/31/2299.
Description	Field	1	Description is required.	Enter a Description.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. The Effective Date must be less than or equal to End Date. Effective Date must be earlier than End Date.
	Field	2	Rate Dates must be within modifier dates.	Change the Effective Dates of the modifier (on Base Information panel) or rates (on Modifier Rate Data panel).
	Field	3	Invalid Date.	Verify keying. Enter a valid date. The date must be numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Effective Date must be greater than or equal to 01/01/1900.
	Field	5	Effective Date is required.	Enter a valid Effective Date.
	Field	6	Date ranges may not overlap for the same Modifier.	There is an existing modifier with the same code for the effective period chosen on this panel.
	Field	7	Effective Date must be less than or equal to 12/31/2299.	Enter a date earlier than 12/31/2299.
End Date	Field	0	End Date must be less than or Equal to 12/31/2299.	Enter a date earlier than 12/31/2299.
	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. End Date must be >= to Effective Date.
	Field	2	Rate Dates must be within modifier dates.	Change the end date of the modifier (on Base Information panel) or rates (on Modifier Rate Data panel).
	Field	3	Invalid Date.	Verify keying. Enter a valid date. The date must be numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Verify keying. End Date must be greater than or equal to 01/01/1900.

Field	Field Type	Error Code	Error Message	To Correct
	Field	5	End Date is required.	Enter a valid End date.
	Field	6	Date ranges may not overlap for the same Modifier.	There is an existing Modifier with the same code for the effective period chosen on this panel.
Long Description	Field	1	Long Description is required.	Enter a Long Description.
	Field	7	You have exceeded the maximum characters allowed for this field. Your text has been truncated to the maximum 4000 characters.	Limit your text to 4000 characters or less.
Modifier	Field	1	Modifier is required.	Enter a valid Modifier Code.
	Field	2	Modifier must be 2 character(s) in length.	Enter a 2 character code for the Modifier.
	Field	3	Date ranges may not overlap for the same Modifier.	There is an existing Modifier with the same code for the effective period chosen on this panel.
	Field	4	A duplicate record cannot be saved.	Verify keying. The information entered already exists. The modifier already exists.
Modifier Category	Field	1	Modifier Category is required.	Select a value from the drop down list.
Modifier Type	Field	1	A valid Modifier Type is required.	Select a Modifier Type from the drop down list.

6.95.5 Base Information-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.95.6 Base Information-Modifier Panel Accessibility

6.95.6.1 To Access the Base Information-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results panel displays.

Step	Action	Response
5	Select row from list of results.	Modifier Maintenance and Information panels display.
6	Click Base Information .	Base Information-Modifier panel displays.

6.95.6.2 To Add on the Base Information-Modifier Panel Accessibility

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Enter Modifier .	
3	Select Modifier Category from drop down list box.	
4	Select Modifier Type from drop down list box.	
5	Enter Description .	
6	Enter Long Description .	
7	Enter Effective Date in MM/DD/CCYY format.	
8	Enter End Date in MM/DD/CCYY format. Note: End Date defaults to 12/31/2299.	
9	Enter CMS Add Date in MM/DD/CCYY format.	
10	Enter CMS Termination Date in MM/DD/CCYY format.	
11	Click Save .	Base Information-Modifier information is saved.

6.95.6.3 To Update on the Base Information-Modifier Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information-Modifier Procedure information is saved.

6.95.6.4 To Delete on the Base Information-Modifier Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.96 Modifier Rate Data-Modifier Panel

6.96.1 Modifier Rate Data-Modifier Panel Narrative

The Modifier Rate Data panel is used to maintain modifier rate data. Processing modifiers are used to change or determine the allowed amount assigned to a procedure. The procedure allowed amount may be calculated or modified with the use of the percentage attribute, amount attribute or quantity attribute.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Modifier] - [search] - [(select row from search results)] - [Modifier Maintenance] - [Base Information]

6.96.2 Modifier Rate Data-Modifier Panel Layout

-Modifier Rate Data-

Percent	Amount	Quantity	Rate Effective Date	Rate Restriction End Date
20%	0	0	01/01/1964	12/31/2299
Percent			Rate Effective Date	
Amount			Rate Restriction End Date	
Quantity				

delete add

6.96.3 Modifier Rate Data-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to enter data and add a new Process Rate for the modifier.	Button	N/A	0
Amount	Dollar amount associated to a modifier for claims pricing. Format is 9999999.99.	Field	Number (Decimal)	9
Delete	Allows user to mark a Process Rate for deletion.	Button	N/A	0
Percent	Percentage associated to the modifier for claims pricing. Format is 9.999.	Field	Number (Decimal)	4
Quantity	Quantity associated to the modifier for claims pricing. Format is 9999.	Field	Number (Decimal)	4
Rate Effective Date	The date that the percentage and amount for the processing modifier becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
Rate End Date	The date that the percentage and amount for the processing modifier is no longer in effect.	Field	Date (MM/DD/CCYY)	8

6.96.4 Modifier Rate Data-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Amount	Field	1	Amount must be greater than or equal to 0000.00.	Amount cannot be negative.
	Field	2	Amount, Percent, or Quantity (One Only) must be greater than zero.	Enter a valid value in any one of the three fields.
	Field	3	Amount, Percent, or Quantity (One Only) can be greater than zero.	Only one of the three fields may be entered.
	Field	4	Enter a valid value.	Amount must be a number.
	Field	5	Amount must be less than or equal to 9999999.99.	Amount cannot exceed 9999999.99.
Percent	Field	1	Percentage Modifier must be greater than or equal to 0.000.	Enter a valid percent amount.
	Field	2	Percentage Modifier must be less than or equal to 9.999.	Enter a valid percent amount.
	Field	3	Amount, Percent, or Quantity (One Only) must be greater than zero.	Enter a valid value in any one of the three fields.
	Field	4	Amount, Percent, or Quantity (One Only) can be greater than zero.	Only one of the three fields may be entered.
	Field	5	Enter a valid value.	Percent must be a numeric value.
Quantity	Field	1	Enter a valid value.	Data must be numeric and ≥ 0 .
	Field	2	Amount, Percent, or Quantity (One Only) must be greater than zero.	Enter a valid value in any one of the three fields.
	Field	3	Amount, Percent, or Quantity (One Only) can be greater than zero.	Only one of the three fields may be entered.
Rate Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter a valid effective date that is less than or equal to the End Date.
	Field	2	Date range segments can not overlap.	Check dates against existing Rate Data segments.
	Field	3	Invalid Date.	Date must be numeric and in MM/DD/CCYY format.

Field	Field Type	Error Code	Error Message	To Correct
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Date must be more recent than 01/01/1900.
	Field	5	Effective date is required.	Enter a valid effective date.
	Field	6	Rate Dates must be within modifier dates.	Verify Input. Rate Data Effective Period must be within Modifier effective period (on Base Information panel).
Rate End Date	Field	1	Effective Date must be less than or equal to End Date.	Enter a valid end date that is greater than or equal to the effective date.
	Field	2	Date range segments can not overlap.	Check dates against existing Rate Data segments.
	Field	3	Invalid Date.	Enter date that is numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Date must be more recent than 01/01/1900.
	Field	5	End date is required.	Enter a valid end date.
	Field	6	Rate Dates must be within modifier dates.	Verify Input. Rate Data Effective Period must be within Modifier effective period (on Base Information panel).

6.96.5 Modifier Rate Data-Modifier Panel Extra Features

Field	Field Type
No extra features found for this /panel.	

6.96.6 Modifier Rate Data-Modifier Panel Accessibility

6.96.6.1 To Access the Modifier Rate Data-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance and Information panels display.
6	Click Base Information .	Base Information-Modifier panel displays with

Step	Action	Response
		Modifier Rate Data displayed at the bottom of panel.

6.96.6.2 To Add on the Modifier Rate Data-Modifier Panel

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Enter Percent .	
3	Enter Amount .	
4	Enter Quantity .	
5	Enter Rate Effective Date in MM/DD/CCYY format.	
6	Enter Rate Restriction End Date in MM/DD/CCYY format. Note: End Date defaults to 12/31/2299.	
7	Click Save .	Modifier Rate Data-Modifier information is saved.

6.96.6.3 To Update on the Modifier Rate Data-Modifier Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Modifier Rate Data-Modifier information is saved.

6.96.6.4 To Delete on the Modifier Rate Data-Modifier Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.97 Group-Modifier Panel

6.97.1 Group-Modifier Panel Narrative

The Group-Modifier panel is used to view Groups in which the Modifier codes are included.

This panel is display only.

Navigation Path: [Reference] – [Modifier] -[[click on 'search' button]] - [(select row from search results)] - [Modifier Maintenance-Modifier] - [Group]

6.97.2 Group-Modifier Panel Layout

Group					
Modifier Group Type	Description	Modifier Range From	Modifier Range To	Effective Date	End Date
1006	CHILD ABUSE	20	22	03/16/2006	12/31/2299
103	PROVIDER INFORMATION	1	20	03/17/2006	12/31/2299
103	PROVIDER INFORMATION	1	21	03/18/2005	03/16/2006
106	TEST	20	56	03/20/2006	12/31/2299
1000	TRANSPORTATION MODIFIERS	20	20	03/08/2006	12/31/2299

6.97.3 Group-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	This is the description of the group type.	Field	Alphanumeric	0
Effective Date	This is the beginning date.	Field	Date (MM/DD/CCYY)	0
End Date	This is the end date.	Field	Date (MM/DD/CCYY)	0
Modifier Group Type	This is the number of the group type.	Field	Number (Integer)	0
Modifier Range From	This is the beginning of the range for the modifier.	Field	Alphanumeric	0
Modifier Range To	This is the end of the range for the modifier.	Field	Alphanumeric	0

6.97.4 Group-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.97.5 Group-Modifier Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.97.6 Group-Modifier Panel Accessibility

6.97.6.1 To Access the Group-Modifier Panel

Step	Action	Response
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Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance and Information panels display.
6	Click Group .	Group-Modifier panel displays.

6.98 Modifier to Modifier Restriction-Modifier Panel

6.98.1 Modifier to Modifier Restriction-Modifier Panel Narrative

The Modifier to Modifier Restriction-Modifier panel is used to view and update modifier to modifier combinations that are invalid if billed on the same claim detail.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Modifier] - [Search] - [(select row from search results)] - [Modifier Maintenance] - [Modifier to Modifier Restriction]

6.98.2 Modifier to Modifier Restriction-Modifier Panel Layout

Modifier Code Start	Modifier Code End	Effective Date	End Date
24	25	12/20/2006	12/21/2006

Select row above to update -or- click Add button below.

Modifier Code Start [Search] Effective Date
Modifier Code End [Search] End Date

Delete Add

6.98.3 Modifier to Modifier Restriction-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to enter data and add a new restriction for the modifier.	Button	N/A	0
Delete	Allows user to mark a restriction to be removed from the modifier.	Button	N/A	0
Effective Date	The first date of service the Modifier Restriction takes effect for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The last date of service the Modifier Restriction takes effect for claims processing.	Field	Date (MM/DD/CCYY)	8
Modifier Code End	The end of the modifier range that would be invalid if billed on the same detail as the Modifier in the Modifier field.	Field	N/A	2
Modifier Code Start	The beginning of the modifier range that would be invalid if billed on the same detail as the Modifier in the Modifier field.	Field	N/A	2

6.98.4 Modifier to Modifier Restriction-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter a valid effective date that is less than or equal to the end date.
	Field	2	Date Range segments cannot overlap.	For the chosen Modifier Start/End code combination, there is already a restriction in place for the chosen date range. Check against the data list for overlapping date segment.
	Field	3	Invalid Date.	The date must be numeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	The date must be more recent than 01/01/1900.
	Field	5	Effective Date is required.	Enter a valid Effective Date.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. End Date must be >= to Effective Date.
	Field	2	Date Range segments cannot overlap.	For the chosen Modifier Start/End code combination, there is already a restriction in place for the chosen date range. Check against the data list for overlapping date segment.
	Field	3	Invalid Date.	Verify keying. The date must be numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Verify keying. The date must be more recent than 01/01/1900.
	Field	5	End Date is required.	Enter a valid End Date.
Modifier Code End	[Search]	1	A Valid modifier is required.	Select a modifier using search link.
	[Search]	2	Modifier From cannot be greater than Modifier To.	Choose a different Modifier Start/End.
Modifier Code Start	[Search]	1	A Valid Modifier is required.	Select a modifier using search link.
	[Search]	2	Modifier From cannot be greater than Modifier To.	Choose a different Modifier Start/End.

6.98.5 Modifier to Modifier Restriction-Modifier Panel Extra Features

Field	Field Type
No extra features found for this page/panel.	

6.98.6 Modifier to Modifier Restriction-Modifier Panel Accessibility

6.98.6.1 To Access the Modifier to Modifier Restriction-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance and Information panels display.
6	Click Modifier to Modifier Restriction .	Modifier to Modifier Restriction-Modifier panel displays.

6.98.6.2 To Add on the Modifier to Modifier Restriction-Modifier Panel

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Click [Search] to locate Modifier Code Start .	Modifier Code Start Search panel displays.
3	Enter search criteria or select from list of search results.	Modifier Code Start information is populated on panel.
4	Click [Search] to locate Modifier Code End .	Modifier Code End Search panel displays.
5	Enter search criteria or select from list of search results.	Modifier Code End information is populated on panel.
6	Enter Effective Date in MM/DD/CCYY format.	
7	Enter End Date in MM/DD/CCYY format.	
8	Click Save .	Modifier to Modifier Restriction-Modifier information is saved.

6.98.6.3 To Update on the Modifier to Modifier Restriction-Modifier Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.

Step	Action	Response
2	Click in desired field to update and perform update.	
3	Click Save .	Modifier to Modifier Restriction-Modifier information is saved.

6.98.6.4 To Delete on the Modifier to Modifier Restriction-Modifier Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.99 Note-Modifier Panel

6.99.1 Note-Modifier Panel Narrative

The Note panel is used to enter notes as to why changes were made to a specific Modifier code. Fields included are for date, time, clerk number and note sequence number.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Modifier Search] - [(Add button) OR (select row from search results)] - [Note]

6.99.2 Note-Modifier Panel Layout

• Note Top Nav ? A X

Sequence Number	Clerk ID	Date	Time	Note
3	RZ78GM	01/04/2006	14:22:53	NOTE 3
2	RZ78GM	01/04/2006	13:43:57	NOTE 2
1	RZ78GM	01/04/2006	13:43:38	NOTE 1

Type changes below.

Sequence Number: 3 Date: 01/04/2006

Clerk ID: RZ78GM Time: 142253

Note*

NOTE 3

delete add

6.99.3 Note-Modifier Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a note.	Button	N/A	0
Clerk ID	Identification of the user who entered the note. This value is set from the user's security profile.	Field	Alphanumeric	8
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Delete	Delete a note.	Button	N/A	0
Note	The actual text of the note.	Field	Alphanumeric	1000
Sequence Number	Sequence number than can uniquely identify a note.	Field	Number (Integer)	9
Time	The time that the note was entered.	Field	Number (Decimal)	6

6.99.4 Note-Modifier Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add Modifier Note text.

6.99.5 Note-Modifier Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for Modifier + 1

Clerk ID - System generated based on users login id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.99.6 Note-Modifier Panel Accessibility

6.99.6.1 To Access the Note-Modifier Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Modifier .	Reference Modifier Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Modifier Search Results panel displays.
5	Select row from list of results.	Modifier Maintenance and Information panels display.
6	Click Note .	Note-Modifier panel displays.

6.99.6.2 To Add on the Note-Modifier Panel

Step	Action	Response
1	Click Add . Sequence Number, Date and Time automatically populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note-Modifier information is saved.

6.99.6.3 To Update on the Note-Modifier Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Note-Modifier information is saved.

6.99.6.4 To Delete on the Note-Modifier Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.100 Reference Procedure Search-Procedure Panel

6.100.1 Reference Procedure Search-Procedure Panel Narrative

The Reference Procedure Search panel is used to search for HCPCS or ICD Procedure information (for inquiry or update) based upon select criteria such as code or description.

The Procedure Search panel is positioned at the top of the Reference Procedure Search page and permits the user to execute a search based upon the entered search parameters.

To search for a HCPCS Procedure, the 'HCPCS' radio button must first be selected. To search for an ICD Procedure, select the 'ICD' radio button and then select Blank, ICD-9 or ICD-10 from 'ICD version' dropdown.

Additionally, security permitting, the user may opt to proceed directly to either the HCPCS Procedure or ICD Procedure Information panels to add a new procedure code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] – [Procedure Search]

6.100.2 Reference Procedure Search-Procedure Panel Layout

6.100.3 Reference Procedure Search-Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Directs the user to the procedure panels necessary to create a new HCPCS or ICD procedure.	Button	N/A	0
Clear	Clears all fields so the user may enter new search criteria.	Button	N/A	0
Description	Text that describes a specific procedure. The user may enter all or part of the description.	Field	Character	40
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are BLANK, ICD-9 and ICD-10.	Combo Box	Drop Down List Box	1
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Combo Box	Radio Button	0
Procedure	Code that identifies a specific procedure. The user may enter all or part of the Procedure Code.	Field	Character	6
Records	Number of records to display after search is completed.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Search	Initiates the search for procedure information matching the given search criteria.	Button	N/A	0
Search Type	Allows to search for HCPCS procedures when the 'HCPCS' radio button is selected or for ICD procedures when the 'ICD' radio button is selected.	Combo Box	Radio Button	0
Sounds Like	Allows the user to perform a phonetic search on description. If the box is checked, a phonetic search is performed using the input description. If the check box is unchecked a literal search is performed.	Combo Box	Check Box	0
Type	Allows searching on the short description, the long description or the lay description.	Combo Box	Radio Button	0

6.100.4 Reference Procedure Search-Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Procedure	Field	1	No rows found.	No records matching the criteria keyed-in were found. Verify Input.

6.100.5 Reference Procedure Search-Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.100.6 Reference Procedure Search-Procedure Panel Accessibility

6.100.6.1 To Access the Reference Procedure Search-Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search-Procedure panel displays.

6.101 Reference Procedure Search Results-Procedure Panel

6.101.1 Reference Procedure Search Results-Procedure Panel Narrative

The Procedure Search Results panel displays a listing of HCPCS or ICD Procedures matching the specified criteria.

This panel is display only.

Clicking/Selecting a row from the list directs the user to either the HCPCS or ICD Procedure Information page (depending on search type) where the user may access additional procedure details.

Navigation Path: [Reference] - [Procedure] - (click on [search] button)

6.101.2 Reference Procedure Search Results-Procedure Panel Layout

Search Results	
Procedure	Description
A0010	AMBULANCE SERVICE, BASIC LIFE SUPPORT (B
A0020	AMBULANCE SERVICE, (BLS) PER MILE, TRANS
A0021	OUTSIDE STATE AMBULANCE SERV
A0030	AMBULANCE SERVICE, CONVENTIONAL AIR SER
A0040	AMBULANCE SERVICE, AIR, HELICOPTER SERV
1 2 3 4 5 6 7 8 9 10 ... Next >	

Search Results	
Procedure	Long Description
A0010	AMBULANCE SERVICE, BASIC LIFE SUPPORT (BLS) BASE RATE, EMERGENCY TRANSPORT, ONE WAY.
A0020	AMBULANCE SERVICE, (BLS) PER MILE, TRANSPORT, ONE WAY
A0021	AMBULANCE SERVICE, OUTSIDE STATE PER MILE, TRANSPORT (MEDICAID ONLY)
A0050	AMBULANCE SERVICE, EMERGENCY, WATER, SPECIAL TRANSPORTATION SERVICES
A0060	AMBULANCE SERVICE, WAITING TIME, ONE HALF (1/2) HOUR INCREMENTS
1 2 3 4 5 6 Next >	

Search Results	
Procedure	Lay Description
J0380	DISCONTINUED DRUG WITH SHELF LIFE EXPIRATION OF 06/04/2008.
87999	THIS CODES IS BEING USED FOR INDEPENDENT LABS TO BILL FOR TROFILE ASSAY

Search Results		
ICD Version	Procedure	Description
9	00.86	RESURFACING HIP, PARTIAL, FEMORAL HEAD I
9	00.87	RESURFACING HIP, PARTIAL ACETABULIM INCL
9	00.91	TRANSPLANT FROM LIVE RELATED DONOR
9	00.92	TRANSPLANT FROM LIVE NONRELATED DONOR
9	00.93	TRANSPLANT FROM CADAVER
1 2 3 4 5 6 7 8 9 10 ... Next >		

Search Results		
ICD Version	Procedure	Long Description
0	02.LV0DZ	OCCCLUSION OF SUPERIOR VENA CAVA WITH INTRALUMINAL DEVICE, OPEN APPROACH
0	02.LV0ZZ	OCCCLUSION OF SUPERIOR VENA CAVA, OPEN APPROACH
0	02.LV3CZ	OCCCLUSION OF SUPERIOR VENA CAVA WITH EXTRALUMINAL DEVICE, PERCUTANEOUS APPROACH
0	02.LV3DZ	OCCCLUSION OF SUPERIOR VENA CAVA WITH INTRALUMINAL DEVICE, PERCUTANEOUS APPROACH
0	02.LV3ZZ	OCCCLUSION OF SUPERIOR VENA CAVA, PERCUTANEOUS APPROACH
1 2 3 4 5 6 7 8 9 10 ... Next >		

6.101.3 Reference Procedure Search Results-Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	Short description of the relevant procedure. This is displayed if "Short" is selected from the "Type" radio buttons.	Field	Character	40
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are '9' for ICD-9 and '0' for ICD-10.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Lay Description	Lay description of the relevant procedure. This is displayed if "Lay" is selected from the "Type" radio buttons.	Field	Alphanumeric	100
Long Description	Long description of the relevant procedure. This is displayed if "Long" is selected from the "Type" radio buttons. For a lengthy description, truncation occurs and only the first 100 characters are displayed.	Field	Alphanumeric	250
Procedure	Code that identifies a specific procedure (HCPCS or ICD).	Field	Character	6

6.101.4 Reference Procedure Search Results-Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.101.5 Reference Procedure Search Results-Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.101.6 Reference Procedure Search Results-Procedure Panel Accessibility

6.101.6.1 To Access the Reference Procedure Search Results-Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results-Procedure panel displays.

6.101.6.2 To Navigate the Reference Procedure Search Results-Procedure Panel

Step	Action	Response
1	Select row from list of results.	Procedure Information and Maintenance panels display.

6.102 Procedure Mini Search-HCPCS Procedure Panel

6.102.1 Procedure Mini Search-HCPCS Procedure Panel Narrative

The HCPCS Procedure Mini-Search panel is used to search for a HCPCS Procedure codes from the HCPCS Procedure Information panel.

This panel is inquiry only.

Navigation Path: [Reference] – [Procedure] - [{Enter search criteria, click on 'search' button}] - [(select row from search results)]

6.102.2 Procedure Mini Search-HCPCS Procedure Panel Layout

6.102.3 Procedure Mini Search-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	Takes the user to Procedure Main Search page so the user can set more advanced search criteria.	Button	N/A	0
Clear	Clears the 'Procedure' field.	Button	N/A	0
Procedure	The Procedure Code used as the search criteria.	Field	Character	6
Search	Initiates 'Search' for Procedure records matching the Procedure Code keyed-in.	Button	N/A	0

6.102.4 Procedure Mini Search-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Next Search By: Procedure	Field	1	No Results found.	Verify Input.

6.102.5 Procedure Mini Search-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.102.6 Procedure Mini Search-HCPCS Procedure Panel Accessibility

6.102.6.1 To Access the Procedure Mini Search-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.

Step	Action	Response
3	Enter search criteria.	
4	Click Search .	Procedure Mini Search-HCPCS Procedure panel displays.

6.102.6.2 To Navigate on the Procedure Mini Search-HCPCS Procedure Panel

Step	Action	Response
1	Enter Procedure .	
2	Click Search .	Procedure Information and Maintenance panels display.

6.103 Procedure Information-HCPCS Procedure Panel

6.103.1 Procedure Information-HCPCS Procedure Panel Narrative

The HCPCS Procedure Information panel is used to view HCPCS procedure code information. HCPCS Procedure Codes are designed around a five-character numeric or alphanumeric coding format defined by the Centers for Medicare & Medicaid Services (CMS) called the Healthcare Common Procedure Coding System (HCPCS). The HCPCS Procedure Code data set is a collection of codes that represent procedures, supplies, products and services which may be provided to health care recipients and provide health-care providers and third party payers a common coding structure for determining claims adjudication. The codes are divided into three levels, or groups, as described below:

Level I

Codes and descriptors copyrighted by the American Medical Association's current procedural terminology, fourth edition (CPT-4). These are 5 position numeric codes representing physician and non-physician services.

Level II

Includes codes and descriptors copyrighted by The American Dental Association's Current Dental Terminology, third edition (CDT-3). These are 5 position alpha-numeric codes comprising the D series. All other Level II codes and descriptors are approved and maintained jointly by the Alpha-Numeric Editorial Panel (consisting of CMS, the Health Insurance Association of America, and the Blue Cross and Blue Shield Association). These are 5 position alpha-numeric codes representing primarily items and non-physician services that are not represented in the Level I codes.

Level III

Codes and descriptors developed by Medicare carriers for use at the local (carrier) level. These are 5 position alpha-numeric codes in the W, X, Y or Z series representing physician and non-physician services that are not represented in the Level I or Level II codes.

This panel is display only.

Navigation Path: [Reference] – [Procedure] - [{Enter search criteria, click on 'search' button}] - [(select row from search results)]

6.103.2 Procedure Information-HCPCS Procedure Panel Layout

Procedure Information			
Procedure	0001T	Description	ENDOVAS REPR ABDO AO ANEURYS
CMS Add Date	01/01/2002	Long Description	ENDOVASCULAR REPAIR OF INFRARENAL ABDOMINAL AORTIC ANEURYSM OR DISSECTION, MODULAR BIFURCATED PROSTHESIS (TWO DOCKING LIMBS)
CMS TOS		Lay Description	
CMS Termination		EOMB	ENDOVASCULAR REPAIR OF INFRA
Medicare Coverage		Unit Type	

6.103.3 Procedure Information-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
CMS TOS	CMS Type of Service (TOS) Code listed on the CMS HCPCS file layout.	Field	Alphanumeric	1
Medicare Coverage	Code denoting Medicare coverage status listed on the CMS HCPCS file layout.	Field	Alphanumeric	1
CMS Add Date	Defined by CMS as the date the HCPCS code was added to the CMS common procedure coding system.	Field	Date (MM/DD/CCYY)	8
CMS Termination	Defined by CMS as the last date for which a procedure code may be used by providers.	Field	Date (MM/DD/CCYY)	8
Description	A short description of the medical procedure that was performed.	Field	Character	40
EOMB	Short description of the service performed that appears on the Recipient's Explanation of Benefits.	Field	Character	30
Long Description	A long description of the medical procedure that was performed.	Field	Character	250
Procedure	Code used to identify a medical procedure.	Field	Character	6
Unit Type	Detailed description of what one unit represents.	Field	Character	100

6.103.4 Procedure Information-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.103.5 Procedure Information-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.103.6 Procedure Information-HCPCS Procedure Panel Accessibility

6.104 Procedure Maintenance-HCPCS Procedure Panel

6.104.1 Procedure Maintenance-HCPCS Procedure Panel Narrative

The Procedure Maintenance panel provides links to the HCPCS Procedure information panels. This panel is inquiry only.

Navigation Path: [Reference] – [Procedure] - [(select HCPCS)] - {click on 'search' button} - [(select row from search results)]

6.104.2 Procedure Maintenance-HCPCS Procedure Panel Layout

6.104.3 Procedure Maintenance-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
ASC Payment Group	Opens the ASC Payment Group panel.	Hyperlink	N/A	0
Base Information	Opens the Base Information panel.	Hyperlink	N/A	0
Benefit Plan Coverage Rules	Opens the Benefit Plan Coverage Rules panel.	Hyperlink	N/A	0
Cancel	Cancels all edits made so far to a panel.	Button	N/A	0
Contract Billing Rules	Opens the Contract Billing Rules panel.	Hyperlink	N/A	0
GCN Seq Xref List	Opens the GCN Seq Xref List panel.	Hyperlink	N/A	0
Group	Opens the Procedure Group panel.	Hyperlink	N/A	0
Lab Fee	Opens the Lab Fee panel. This panel is not used by Alabama.at this time).	Hyperlink	N/A	0
Max Fee	Opens the Max Fee panel.	Hyperlink	N/A	0
MedB Noncovered	Opens the MedB Noncovered panel.	Hyperlink	N/A	0
Modifier	Opens the Modifier panel.	Hyperlink	N/A	0
NDC	Opens the NDC panel.	Hyperlink	N/A	0
New	Opens a group of empty panels so a new 'Procedure' may be created.	Button	N/A	0
Note	Opens the Note panel.	Hyperlink	N/A	0
Reimbursement Rules	Opens the Reimbursement Rules panel.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Restriction	Sub group under 'Procedure' that displays a list of links related to procedure restrictions.	Hyperlink	N/A	0
Restriction Base Information (Restriction)	Opens the Restriction Base Information panel.	Hyperlink	N/A	0
Save	Saves all changes made so far to any panel under 'Procedure Maintenance'.	Button	N/A	0
Tooth (Restriction)	Opens the Tooth panel.	Hyperlink	N/A	0
Tooth Quadrant (Restriction)	Opens the Tooth Quadrant panel.	Hyperlink	N/A	0

6.104.4 Procedure Maintenance-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.104.5 Procedure Maintenance-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.104.6 Procedure Maintenance-HCPCS Procedure Panel Accessibility

6.104.6.1 To Access the Procedure Maintenance-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row from list of results.	Procedure Maintenance-HCPCS Procedure panel displays.

6.104.6.2 To Navigate the Procedure Maintenance-HCPCS Procedure Panel

Step	Action	Response
1	Click on hyperlink to select an area to add or modify.	Select panel displays.

6.104.6.3 To Access the Procedure Information-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row from list of results.	Procedure Information-HCPCS Procedure panel displays.

6.105 Base Information-HCPCS Procedure Panel

6.105.1 Base Information-HCPCS Procedure Panel Narrative

The Base Information panel is used to maintain HCPCS procedure base information. HCPCS Procedure Codes are designed around a five-character numeric or alphanumeric coding format defined by the Centers for Medicare & Medicaid Services (CMS) called the Healthcare Common Procedure Coding System (HCPCS). The HCPCS Procedure Code data set is a collection of codes that represent procedures, supplies, products and services which may be provided to health care recipients and provide health-care providers and third party payers a common coding structure for determining claims adjudication. The codes are divided into three levels, or groups, as described below:

Level I

Codes and descriptors copyrighted by the American Medical Association's current procedural terminology, fifth edition (CPT-5). These are 5 position numeric codes representing physician and non-physician services.

Level II

Includes codes and descriptors copyrighted by The American Dental Association's Current Dental Terminology, fourth edition (CDT-4). These are 5 position alpha-numeric codes comprising the D series. All other Level II codes and descriptors are approved and maintained jointly by the Alpha-Numeric Editorial Panel (consisting of CMS, the Health Insurance Association of America, and the Blue Cross and Blue Shield Association). These are 5 position alpha-numeric codes representing primarily items and non-physician services that are not represented in the Level I codes.

Level III

Codes and descriptors developed by Medicare carriers for use at the local (carrier) level. These are 5 position alpha-numeric codes in the W, X, Y or Z series representing physician and non-physician services that are not represented in the Level I or Level II codes.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [{ Select [HCPCS] as Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance] - [Base Information]

6.105.2 Base Information-HCPCS Procedure Panel Layout

The screenshot shows a web-based form titled "Base Information" with a blue header bar. The form contains several input fields and a dropdown menu. The fields are labeled as follows: "Procedure*" with the value "0001F"; "Description*" with the value "BLOOD PRESSURE, MEASURED"; "Long Description*" with the value "BLOOD PRESSURE, MEASURED"; "Lay Description" (empty); "EOMB*" with the value "BLOOD PRESSURE, MEASURED"; "Unit Type" with a dropdown menu showing "Box of 50"; "CMS Add Date*" with the value "01/01/2004"; "CMS Termination" (empty); and "MC Service Class" with a dropdown menu showing "10 MISC. MEDICAL". A "delete" button is located at the bottom right of the form.

6.105.3 Base Information-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
CMS Add Date	The date that the Procedure Code was added by CMS.	Field	Date (MM/DD/CCYY)	8
CMS Termination	The date that the Procedure Code is terminated by CMS.	Field	Date (MM/DD/CCYY)	8
Delete	Delete a Procedure Code record.	Button	N/A	0
Description	A short description of the medical procedure that was performed.	Field	Character	40
EOMB	Short description of the service performed that appears on the Recipient's Explanation of Benefits.	Field	Character	30
Lay Description	The layman description of the medical procedure that was performed.	Field	Character	100
Long Description	A long description of the medical procedure that was performed.	Field	Character	250
MC Service Class	The service class indicates the type of services provided.	Combo Box	Drop Down List Box	0
Procedure	Code used to identify a medical procedure.	Field	Character	6
Unit Type	Detailed description of what one unit represents.	Field	Character	100

6.105.4 Base Information-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
CMS Add Date	Field	1	CMS Add Date is required.	Enter a valid CMS Add Date.
	Field	2	Invalid date.	The date must be in MM/DD/CCYY format.
	Field	3	CMS Add Date must be greater than or equal to 01/01/1900.	The date must be more recent than 01/01/1900.
CMS Termination	Field	1	Invalid date.	The date must be in MM/DD/CCYY format.
	Field	2	CMS Termination Date must be greater than or equal to 01/01/1900.	The date must be more recent than 01/01/1900.
Description	Field	1	Description is required.	Verify keying.
EOMB	Field	1	EOMB is required.	Verify keying.
Long Description	Field	1	Long Description is required.	Verify keying.
Procedure	Field	1	Procedure is required.	Verify keying.
	Field	2	Procedure code must be at least 4 characters in length.	Verify keying. Procedure code must be at least 4 characters.
	Field	3	A valid Procedure Limits is required.	Key required restriction information on Restriction Base Information panel.

6.105.5 Base Information-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.105.6 Base Information-HCPCS Procedure Panel Accessibility

6.105.6.1 To Access the Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row from list of results.	Procedure Maintenance and Information panels display.
6	Click Base Information .	Base Information-HCPCS Procedure panel

Step	Action	Response
		displays.

6.105.6.2 To Add on the Base Information-HCPCS Procedure Panel Accessibility

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Enter Procedure .	
3	Enter Description .	
4	Enter Long Description .	
5	Enter Lay Description .	
6	Enter EOMB .	
7	Select Unit Type from drop down list box.	
8	Enter CMS Add Date in MM/DD/CCYY format. Note: Date defaults to current date.	
9	Enter CMS Termination Date in MM/DD/CCYY format. Note: Date Defaults to 12/23/2299.	
10	Select MC Service Class from drop down list box.	
11	Click Save .	Base Information-HCPCS Procedure information is saved.

6.105.6.3 To Update on the Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information-HCPCS Procedure information is saved.

6.105.6.4 To Delete on the Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.106 ASC Payment Group-HCPCS Procedure Panel

6.106.1 ASC Payment Group-HCPCS Procedure Panel Narrative

The ASC Payment Group-HCPCS Procedure panel allows the user to modify the Ambulatory Surgical Center groups assigned to a procedure. The ASC group is used to determine the ASC rate paid on a claim.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [{Select [HCPCS] as Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [ASC Payment Group]

6.106.2 ASC Payment Group-HCPCS Procedure Panel Layout

ASC Payment Group	Rate Type	Effective Date	End Date
ASC Group 1	Early Intervention	01/01/2001	01/01/2002
ASC Group 2	Default	01/01/1980	12/31/2299

Type changes below.

ASC Payment Group: ASC Group 1
Rate Type: Early Intervention
Effective Date: 01/01/2001
End Date*: 01/01/2002

delete add

6.106.3 ASC Payment Group-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add an ASC Pricing segment	Button	N/A	0
ASC Payment Group	Ambulatory Surgical Center (ASC) payment group codes classify procedures into different payment groups that are based on surgical procedure complexity. Rates by ASC payment group are established by CMS.	Combo Box	Drop Down List Box	0
Delete	Delete an ASC Pricing segment.	Button	N/A	0
Effective Date	The date an Ambulatory Surgical Center rate becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date an Ambulatory Surgical Center rate is no longer in effect for claims processing.	Field	Date (MM/DD/CCYY)	8
Rate Type	Code used to identify the rate type to use in determining provider reimbursement.	Combo Box	Drop Down List Box	0

6.106.4 ASC Payment Group-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
ASC Payment Group	Field	1	A valid ASC Payment Group is required.	Select an ASC Payment Group.
	Field	2	ASC Procedure Segments may not overlap for the same ASC Payment Group and Rate Type.	Correct overlap condition. Segments may not overlap for the same ASC Payment Group and Rate Type.
Effective Date	Field	1	Invalid date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	2	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is greater than or equal to 01/01/1900.
	Field	3	Effective Date must less than or equal to 12/31/2299.	Enter an Effective Date less than or equal to 12/31/2299.
	Field	4	Effective Date must be less than or equal to End Date.	Enter an Effective Date less than or equal to the End Date.
	Field	5	Effective Date is required.	Enter an Effective Date.
End Date	Field	1	Invalid date.	Enter an End Date must be in MM/DD/CCYY format.
	Field	2	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is greater than or equal to 01/01/1900.
	Field	3	End Date must less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
	Field	4	End Date is required.	Enter an End Date.
Rate Type	Field	1	A valid Rate Type is required.	Select a valid rate Type from the list.

6.106.5 ASC Payment Group-HCPCS Procedure Panel Extra Features

Panel does not allow overlaps for the same ASC Group, Rate Type, and effective/end dates.

The same ASC Group can have overlapping date segments as long as the Rate Type is different.

6.106.6 ASC Payment Group-HCPCS Procedure Panel Accessibility

6.106.6.1 To Access the ASC Payment Group-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.

Step	Action	Response
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click ASC Payment Group .	ASC Payment Group-HCPCS Procedure panel displays.

6.106.6.2 To Add on the ASC Payment Group-HCPCS Procedure Panel

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Select ASC Payment Group from drop down list box.	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Select Rate Type from drop down list box.	
5	Enter End Date in MM/DD/CCYY format.	
6	Click Save .	ASC Payment Group-HCPCS Procedure information is saved.

6.106.6.3 To Update on the ASC Payment Group-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	ASC Payment Group-HCPCS Procedure information is saved.

6.106.6.4 To Delete on the ASC Payment Group-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.107 Benefit Plan Coverage Rules- HCPCS Procedure Panel

6.107.1 Benefit Plan Coverage Rules- HCPCS Procedure Panel Narrative

The Benefit Plan Coverage Rules-Drug panel is used to view the member plan coverage information for a specific procedure code. This panel is display only.

Navigation Path: [Reference] – [Procedure] - (Select [HCPCS] as Search Type and click on [search] and select row from search results) - [Procedure Maintenance] - [Procedure] - [Benefit Plan Coverage Rules]

6.107.2 Benefit Plan Coverage Rules- HCPCS Procedure Panel Layout

Benefit Plan Coverage Rules									Top	Nav	?	⌵	✕
{Recipient} Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date					
ALIEN	Alien Emergency Services	Benefit Plan	None	Default	No	No	01/01/1960	12/31/2299					

6.107.3 Benefit Plan Coverage Rules- HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Identifies the associated list of claim types as included or excluded for the covered benefit.	Combo Box	Drop Down List Box	0
Copay Allowed	Yes/No indicator used to identify programs that qualify for copay calculations during claims payment determination.	Field	Character	3
Description	Description of the Recipient Plan.	Field	Character	50
Effective Date	Date the Recipient Plan becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective date.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Recipient Plan becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this benefit plan.	Field	Character	30
Plan Type	Type of plan is either an Assignment Plan (ASGN) or a Benefit Plan (BNFT).	Field	Character	15
Recipient Only	Yes/No indicator used to identify programs that are used for recipient enrollment only. No services are covered by the program.	Field	Character	3
Recipient Plan	Code that identifies the recipient plan that is supported in the system.	Field	Character	5

6.107.4 Benefit Plan Coverage Rules- HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.107.5 Benefit Plan Coverage Rules- HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.107.6 Benefit Plan Coverage Rules- HCPCS Procedure Panel Accessibility

6.107.6.1 To Access the Benefit Plan Coverage Rules- HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Click HCPCS .	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row.	Procedure Information and Maintenance panels display.
6	Click Benefit Plan Coverage Rules .	Benefit Plan Coverage Rules-HCPCS Procedure panel displays.

6.108 Contract Billing Rules- HCPCS Procedure Panel

6.108.1 Contract Billing Rules- HCPCS Procedure Panel Narrative

The Contract Billing Rules- HCPCS Procedure panel is used to display Provider Contracts applicable to procedures.

This panel is display only.

Navigation Path: [Reference] - [Procedure] - (Select [HCPCS] as Search Type and click on [Search] button) - (Select row from search results) - [Procedure Maintenance] - [Procedure] - [Contract Billing Rules]

6.108.2 Contract Billing Rules- HCPCS Procedure Panel Layout

Contract Billing Rules							Top	Nav	?	⌵	✕
Provider Contract	Financial Payer	Description	Claim Type Edits	Effective Date	End Date	Inactive Date					
LTC	Default	LTC Waiver		01/01/1960	12/31/2299	12/31/2299					
NET	Default	Non Emergency Trans		01/01/1960	12/31/2299	12/31/2299					
01/05/2006											
Open Coverage (No Restrictions)											
01/06/2006											

6.108.3 Contract Billing Rules- HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Attribute indicates what type of claim type program editing is to be performed. If the indicator is set to 'N' (non), no claim type to program editing is performed. If the indicator is set to 'I' (include), only the claim types listed are billable for the specified program. If the indicator is set to 'E' (exclude), the claim types listed are not billable for the specified program.	Field	Character	1
Description	Description of the provider contract.	Field	Character	30
Effective Date	Date the Provider Contract becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective dates.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Provider Contract becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this provider contract.	Field	Character	0
Inactive Date	Date/Time the Provider Contract can no longer be used regardless of dates of service on the claim.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Provider Contract	Classification of services a Provider can bill. A provider may have multiple contracts.	Field	Character	5

6.108.4 Contract Billing Rules- HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.108.5 Contract Billing Rules- HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.108.6 Contract Billing Rules- HCPCS Procedure Panel Accessibility

6.108.6.1 To Access the Contract Billing Rules- HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Click Search .	Reference Procedure Search Results panel displays.
4	Select row.	Procedure Information panel displays.
5	Click Contract Billing Rules .	Contract Billing Rules panel displays.

6.109 GCN Seq Xref List

6.109.1 GCN Seq Xref List Panel Narrative

GCN Seq Xref List panel allows users to view and maintain the GSN of a procedure. In addition, there is a read-only panel that list all the NDCs associated with the NDCs that are associated with the procedure when requested.

This panel is display only.

Navigation Path: - [Reference - Procedure] - [(click on 'search' button)] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [GCN Seq Xref List]

6.109.2 GCN Seq Xref List Panel Layout

GCN Seq Xref List

GCN Seq Number	GCN Seq Description	Effective Date	End Date
51660	3,4-DIAMINOPYRIDINE MISCELL 98% POWDER	07/28/2010	09/28/2010
52794	A-ACETYLMADELIC ACID MISCELL 100% POWDER	07/05/2010	08/05/2010
50464	ETONOGESTREL/ETHINYL ESTRADIOL VAGINAL 0.12-0.015 VAG RING	07/23/2010	09/23/2010
50110	A-CYSTEINE/ARG ZN/CLUT/MV-MN ORAL 600-140-10 PACKET	07/26/2011	07/26/2012
49742	MOXIFLOXACIN HCL/SOD CL INTRAVEN. 400MG/.25L PIGGYBACK	01/01/2008	12/31/2299
39365	AA 2.75%/CALCIUM/LYTES/D10W INTRAVEN 2.75% IV SOLN	07/21/2010	09/21/2010
11969	A&D/SAFFLOWER OIL/TRIETHANOL TOPICAL LOTION	09/09/2011	09/09/2012
1217	0.25 NORMAL SALINE INJECTION 0.2% DISP SYRIN	02/02/2010	02/03/2010
1217	0.25 NORMAL SALINE INJECTION 0.2% DISP SYRIN	01/01/2010	02/01/2010
1217	0.25 NORMAL SALINE INJECTION 0.2% DISP SYRIN	04/04/2010	05/04/2010

1 2 Next >

Type changes below.

GCN Seq Number: 52794 [Search] Effective Date*: 07/05/2010

GCN Seq Description: A-ACETYLMADELIC ACID MISCELL 100% POWDER End Date*: 08/05/2010

--NDC List-- The data below is for the row selected above

NDC	Brand Name	Covered
49452010301	ALPHA-ACETYLMADELIC ACID	No
49452010302	ALPHA-ACETYLMADELIC ACID	No
51927118700	ALPHA-ACETYLMADELIC ACID	No

6.109.3 GCN Seq Xref List Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a GCN	Button	N/A	0
Brand Name	Brand name of the relevant drug. Contains only the brand name of the drug(s) returned from the search criteria. This is displayed if the 'Brand Name' radio button is selected.	Field	Character	30
Covered	Indicates the drug is covered (Yes) or not covered (No) on the request date. The results are in 'Covered' order.	Field	Character	1
Delete	Allows a user to delete a GCN.	Button	N/A	
Effective Date	This is the beginning date of the GCN.	Field	Date (MM/DD/CCYY)	0
End Date	This is the end date of the GCN.	Field	Date (MM/DD/CCYY)	0

Field	Description	Field Type	Data Type	Length
GCN Seq Description	Generic name of the relevant drug. Contains only the generic name of the drug(s) returned from the search criteria. This is displayed if the 'Generic Name' radio button is selected.	Field	Character	63
GCN Seq Number	The Generic Code Number Sequence Number of a drug that represents a unique combination of ingredient(s), strength, dosage form and route of administration for a generic drug formulation. Aggregates drug products that share like ingredient sets, route of administration, dosage form, and strength of drug but are marketed by multiple manufacturers.	Field	Number (Integer)	5
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size. The NDC is represented in an 11-digit 5-4-2 format: A 5 digit labeler code, a 4-digit product code, and a 2-digit package code.	Field	Character	11

6.109.4 GCN Seq Xref List Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
GCN Seq Number	Field	1	A valid GCN is required.	Enter a GCN Seq Number.
GCN Seq Number	Field	4	GCN Sequence Number cannot overlap.	Correct overlapping dates.
Effective Date[Field is required]	Field	2	Effective Date is required.	Enter an Effective Date in MM/DD/CCYY format.
End Date[Field is required]	Field	3	End Date is required.	Enter an End Date in MM/DD/CCYY format.

6.109.5 GCN Seq Xref List Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.109.6 GCN Seq Xref List Panel Accessibility

6.109.6.1 To Access the GCN Seq Xref List Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Procedure search panel displays.
3	Search for any Procedure .	Procedure Maintenance panel displays.
4	Point to GCN Seq Xref List Panel.	GCN Seq Xref List Panel displays.

6.110 Group-HCPCS Procedure Panel

6.110.1 Group-HCPCS Procedure Panel Narrative

The Group-HCPCS Procedure panel is used to view Groups in which the Procedure Codes are included.

This panel is display only.

Navigation Path: [Reference] – [Procedure] -[Select [HCPCS] as Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [Group]

6.110.2 Group-HCPCS Procedure Panel Layout

Group							Top	Nav	?	A	△	X
Procedure Group Type	Description	Procedure Code From	To	Modifier	Effective Date	End Date						
3015	TCM Procedure Group	0001F	0001F	20	01/23/2007	12/31/2299						

6.110.3 Group-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	The description of the HCPCS procedure group.	Field	Character	50
Effective Date	The date of service the HCPCS Procedure Code becomes effective for the HCPCS procedure group.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the HCPCS Procedure Code is no longer effective for the HCPCS procedure group.	Field	Date (MM/DD/CCYY)	8
Modifier	The modifier code identified for a particular procedure code.	Field	Character	2
Procedure Code (From)	A lower range of code which identifies a medical, dental or DME procedure. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Character	5
Procedure Code (To)	A higher range of code which identifies a medical, dental or DME procedure. service. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Character	5
Procedure Group Type	Code that categorizes the HCPCS Procedure Codes into a particular group.	Field	Number (Integer)	4

6.110.4 Group-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.110.5 Group-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.110.6 Group-HCPCS Procedure Panel Accessibility

6.110.6.1 To Access the Group-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Group .	Group-HCPCS Procedure panel displays.

6.111 Max Fee-HCPCS Procedure Panel

6.111.1 Max Fee-HCPCS Procedure Panel Narrative

The Max Fee panel is used to maintain the max fee allowed amount and relative value units for a Procedure Code or Procedure Code/modifier combination.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [{Select HCPCS as Search Type} and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [Max Fee]

6.111.2 Max Fee-HCPCS Procedure Panel Layout

Modifier	Modifier2	Modifier3	Modifier4	Rate Type	Allowed Amount	Relative Value	Effective Date	End Date	InactiveDate
				Default	\$0.00	0	01/01/2005	12/31/2299	12/31/2299
				Default	\$197.03	0	07/01/1993	12/30/1999	12/31/2299
				Default	\$207.40	0	08/01/1988	06/30/1993	12/31/2299
				Default	\$12.20	0	05/01/1984	07/31/1988	12/31/2299

Select row above to update -or- click Add button below.

Modifier [Search] Effective Date []
Modifier2 [Search] End Date []
Modifier3 [Search] InactiveDate []
Modifier4 [Search]
Rate Type [v]
Allowed Amount []
Relative Value []

delete add

6.111.3 Max Fee-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add a new Max fee for this procedure.	Button	N/A	0
Allowed Amount	The maximum amount that may be paid for the Procedure Code. Format 9999999.99.	Field	Number (Decimal)	9
Delete	Allows user to delete a Max fee record from this procedure.	Button	N/A	0
Effective Date	Based on date of service, this is the date the Procedure Code or Procedure Code/modifier combination becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	Based on date of service, this is the last day the Procedure Code or Procedure Code/modifier combination is effective for use in claims processing.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Inactive Date	Date/Time the Max Fee can no longer be used regardless of dates of service on the claim. Time is not displayed but time will be defaulted to 00:00 when selecting a date for processing. Future Inactive Date Restrictions prevent inactivating a segment while claims are processing.	Field	Date (MM/DD/CCYY)	8
Modifier	Modifier used to further describe Procedure Code. User can use the 'search' link to select a modifier.	Field	N/A	0
Modifier2	Second modifier used to further describe Procedure Code. User can use the 'search' link to select a modifier.	Field	N/A	0
Modifier3	Third modifier used to further describe Procedure Code. User can use the 'search' link to select a modifier.	Field	N/A	0
Modifier4	Fourth modifier used to further describe Procedure Code. User can use the 'search' link to select a modifier.	Field	N/A	0
Rate Type	Code used to identify the rate type to use in determining provider reimbursement.	Combo Box	Drop Down List Box	0
Relative Value	The relative value unit is a grading of the relative difficulty of medical services and procedures used in determining payment. Format 999. Only whole numbers are allowed.	Field	Number (Integer)	

6.111.4 Max Fee-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Allowed Amount	Field	1	Allowed Amount must be greater than or equal to 0.	Verify keying. Allowed Amount must be >= zero.
	Field	2	Allowed Amount must be less than or equal to 9999999.99.	Verify keying. Allowed Amount can not be > 9999999.99.
	Field	3	Allowed Amount is required.	Allowed Amount must have a value.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. End Date must be >= Effective Date.
	Field	2	Max Fee Pricing already active for date entered.	Verify dates with other records in the list. Dates cannot overlap.
	Field	3	Invalid Date.	Verify keying. The date must be numeric and in MM/DD/CCYY format.

Field	Field Type	Error Code	Error Message	To Correct
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter a valid Effective Date more recent than 01/01/1900.
	Field	5	Effective date is required.	Verify keying. Date must be in MM/DD/CCYY format.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. End Date must be >= to Effective Date.
	Field	2	Max Fee Pricing already active for date entered.	Verify dates against existing segment.
	Field	3	Invalid Date.	Verify keying. Date must be numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter a valid End Date more recent than 01/01/1900.
	Field	5	End Date is required.	Enter a valid End Date.
Inactive Date	Field	1	Inactive Date is required.	Enter an Inactive Date.
	Field	2	Inactive Date must be after the current System Date.	Enter an Inactive Date that is after the current System Date.
	Field	3	Inactive Date must be less than or equal to 12/31/2299.	Enter an Inactive Date that is less than or equal to 12/31/2299.
	Field	4	Invalid Date.	Enter an Inactive Date in MM/DD/CCYY format.
	Field	5	Inactive Date must be greater than or equal to 01/01/1900.	Enter an Inactive Date that is greater than or equal to 01/01/1900.
Modifier	Field	1	Procedure/Modifier combination is not valid.	Choose a different Modifier.
	Field	2	Modifier/Modifier combination is not valid.	Choose a different Modifier.
	Field	3	Modifier codes must be unique.	Verify keying. Make sure modifiers are Unique.
	Field	4	Modifier codes must be in ascending order.	Verify keying. Make sure modifiers are in ascending order.
Modifier2	Field	1	Modifier/Modifier combination is not valid.	Choose a different Modifier.
	Field	2	Modifier codes must be unique.	Verify keying. Make sure modifiers are Unique.
	Field	3	Modifier codes must be in ascending order.	Verify keying. Make sure modifiers are in ascending order.

Field	Field Type	Error Code	Error Message	To Correct
	Field	4	Procedure/Modifier2 combination is not valid.	Choose a different Modifier.
Modifier3	Field	1	Modifier/Modifier combination is not valid.	Choose a different Modifier.
	Field	2	Modifier codes must be unique.	Verify keying. Make sure modifiers are Unique.
	Field	3	Modifier codes must be in ascending order.	Verify keying. Make sure modifiers are in ascending order.
	Field	4	Procedure/Modifier3 combination is not valid.	Choose a different Modifier.
Modifier4	Field	1	Modifier/Modifier combination is not valid.	Choose a different Modifier.
	Field	2	Modifier codes must be unique.	Verify keying. Make sure modifiers are Unique.
	Field	3	Modifier codes must be in ascending order.	Verify keying. Make sure modifiers are in ascending order.
	Field	4	Procedure/Modifier4 combination is not valid.	Choose a different Modifier.
Rate Type	Field	1	Rate Type is required.	Verify keying. Enter a valid Rate Type.
Relative Value	Field	2	Relative Value must be greater than or equal to 0.	Verify keying. Relative value must be >= zero.
	Field	3	Relative Value must be less than or equal to 999.9.	Verify keying. Relative value can not be > 999.9.
	Field	4	Relative Value is required.	Relative Value must have a value.

6.111.5 Max Fee-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.111.6 Max Fee-HCPCS Procedure Panel Accessibility

6.111.6.1 To Access the Max Fee-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.

Step	Action	Response
3	Select HPCPS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Max Fee .	Max Fee-HPCPS Procedure panel displays.

6.111.6.2 To Add on the Max Fee-HPCPS Procedure Panel

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Click [Search] to locate Modifier .	Modifier Search panel displays.
3	Enter search criteria or select row from search results.	Modifier information populates on panel.
4	Click [Search] to locate Modifier2 .	Modifier2 Search panel displays.
5	Enter search criteria or select row from search results.	Modifier2 information populates on panel.
6	Click [Search] to locate Modifier3 .	Modifier3 Search panel displays.
7	Enter search criteria or select row from search results.	Modifier3 information populates on panel.
8	Click [Search] to locate Modifier4 .	Modifier4 Search panel displays.
9	Enter search criteria or select row from search results.	Modifier4 information populates on panel.
10	Select Rate Type from drop down list box.	
11	Enter Allowed Amount .	
12	Enter Relative Date .	
13	Enter Effective Date in MM/DD/CCYY format.	
14	Enter End Date in MM/DD/CCYY format.	
15	Enter Inactive Date in MM/DD/CCYY format.	
16	Click Save .	Max Fee-HPCPS Procedure information is saved.

6.111.6.3 To Update on the Max Fee-HPCPS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform	

Step	Action	Response
	update.	
3	Click Save .	Max Fee-HCPCS Procedure information is saved.

6.111.6.4 To Delete on the Max Fee-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.112 MedB Noncovered-HCPCS Procedure Panel

6.112.1 MedB Noncovered-HCPCS Procedure Panel Narrative

The MedB Noncovered panel is used to identify a procedure to be a procedure not covered under Medicare B.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference]-[Procedure] - [Select [HCPCS] as [Search Type and click on 'search' button and select a row from the result list] - [Procedure Maintenance] - [Procedure] - [MedB Noncovered]

6.112.2 MedB Noncovered-HCPCS Procedure Layout



6.112.3 MedB Noncovered-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Add a Procedure Code to be a procedure not covered under Medicare B.	Button	N/A	0
Delete	Delete a Procedure Code so that it is covered under Medicare B.	Button	N/A	0
Procedure Code	This identifies the procedure being defined as not covered under Medicare B. This is a Read-only field with its value being same as the Procedure Code of procedure open on the panel.	Field	Character	5

6.112.4 MedB Noncovered-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.112.5 MedB Noncovered-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.112.6 MedB Noncovered-HCPCS Procedure Panel Accessibility

6.112.6.1 To Access the MedB Noncovered-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Search Results display.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click MedB Noncovered .	MedB Noncovered-HCPCS Procedure panel displays.

6.112.6.2 To Add on the MedB Noncovered-HCPCS Procedure Panel

Step	Action	Response
1	Click New .	Activates fields for entry of data or selection from lists.
2	Enter Procedure Code .	
3	Click Save .	MedB Noncovered-HCPCS Procedure information is saved.

6.112.6.3 To Update on the MedB Noncovered-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	MedB Noncovered-HCPCS Procedure information is saved.

6.112.6.4 To Delete on the MedB Noncovered-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.113 Modifier-HCPCS Procedure Panel

6.113.1 Modifier-HCPCS Procedure Panel Narrative

Valid Procedure/modifier combinations. Includes the dates that the combinations are in effect. A modifier provides the means by which the reporting physician or provider can indicate that a service or procedure that has been performed has been altered by some specific circumstance but not changed in its definition or code.

Navigation Path: [Reference - Procedure] - [{click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [Modifier]

6.113.2 Modifier-HCPCS Procedure Panel Layout

Modifier	Edit	Effective Date	End Date
4A - PATIENT IN SHOCK	Allowed	01/01/2001	12/31/2002
50 - BILATERAL PROCEDURE	Not Allowed	01/01/2003	01/01/2005

Type changes below.

Modifier: 4A - PATIENT IN SHOCK
Edit*: Allowed
Effective Date: 01/01/2001
End Date*: 12/31/2002
delete add

6.113.3 Modifier-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
add	Allows user to add data and add a modifier for this procedure	Button	N/A	0
delete	Allows user to delete a modifier record for deletion.	Button	N/A	0
Edit	Indicates the type of editing necessary for the procedure/modifier combination. Valid values are 'A' (Allowed), 'N' (Not Allowed), or 'R' (Required). An 'A' indicates the modifier is allowed to be billed with the procedure. An 'N' indicates the modifier cannot be billed with the procedure. An 'R' indicates the modifier is required to bill the procedure. If more than 1 'required' modifier exist for a procedure, the claim only needs 1 of the required modifiers be billed.	Field	Drop Down List Box	0
Effective Date	The date a modifier rule becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date a modifier rule is no longer in effect for claims processing.	Field	Date (MM/DD/CCYY)	8
Modifier	The modifier code used to further describe a procedure.	List view	N/A	0

6.113.4 Modifier-HCPCS Procedure Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
Edit	Field	1	Edit is required.	Select an option for Edit from the list.
	Field	2	Allowed & Not Allowed Invalid Restriction Combination.	Allowed & Not Allowed Invalid Restriction Combination.
Effective Date	Field	1	Effective Date[] must be less than or equal to End Date[]	Verify dates. Effective Date must be <= to End Date.
	Field	3	Invalid Date. Format is mm/dd/yyyy	Verify keying. The date must be numeric and in MM/DD/CCYY format
	Field	4	Effective Date must be greater than or equal to 1/1/1900.	Verify keying. The date must be recent than 1/1/1900
	Field	5	Effective Date is required.	Enter a valid Effective Date.
	Field	6	Effective Date must be less than or equal to 12/31/2299	Verify keying. The effective date must be less than or equal to 12/31/2299.
End Date	Field	1	Effective Date[] must be less than or equal to End Date[]	Verify dates. End Date must be >= to Effective Date.
	Field	3	Invalid Date. Format is MM/DD/CCYY.	Verify keying. The date must be numeric and in MM/DD/CCYY format
	Field	4	End Date must be greater than or equal to 1/1/1900.	Verify keying. The date must be recent than 1/1/1900

6.113.5 Modifier-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.113.6 Modifier-HCPCS Procedure Panel Accessibility

6.113.6.1 To Access the Modifier-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.

Step	Action	Response
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row from list of results.	Procedure Maintenance and Information panels display.
6	Click Modifier .	Modifier panel displays.

6.114 NDC - HCPCS Procedure Panel

6.114.1 NDC - HCPCS Procedure Panel Narrative

The NDC panel is an 'inquiry only' panel that lists the cross reference(s) between the selected HCPCS procedure and associated NDCs (if applicable). HCPCS procedure codes are much more generic than NDCs and thus may have a many to 1 relationship (i.e. HCPCS to NDC).

This panel is display only.

Navigation Path: [Reference] – [Procedure] - [{Select [HCPCS] as [Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [NDC]

6.114.2 NDC - HCPCS Procedure Panel Layout

NDC					Top Nav ? A X
NDC	Brand Name	Effective Date	End Date	System Updatable	
00517090125	HYDRALAZINE HCL	01/01/2005	12/31/2299	Y	
00703820194	HYDRALAZINE HCL	07/20/2001	12/31/2299	Y	
63323061401	HYDRALAZINE HCL	01/01/2005	12/31/2299	N	
00517091125	HYDRALAZINE HCL	01/01/2005	03/31/2009	Y	
63323061455	HYDRALAZINE HCL	10/01/2007	12/31/2299	Y	

6.114.3 NDC- HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Brand Name	Name that appears on the package label provided by the manufacturer.	Field	Character	35
Effective Date	First date of service the NDC becomes effective for this procedure.	Field	Date (MM/DD/CCYY)	8
End Date	Last date of service the NDC is effective for this procedure.	Field	Date (MM/DD/CCYY)	8
NDC	Unique code assigned to a drug product by the FDA and the manufacturer or distributor. It identifies the manufacturer/distributor, drug, dosage form, strength, and package size.	Field	Character	11
System Updatable	Indicates whether record was inserted/updated from Batch or Manual/UI.	Field	Character	1

6.114.4 NDC - HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.114.5 NDC- HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.114.6 NDC- HCPCS Procedure Panel Accessibility

6.114.6.1 To Access the NDC - HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Procedure search panel displays.
3	Search for any Procedure .	Procedure Maintenance panel displays.
4	Point to NDC .	NDC Panel displays.

6.115 Note-HCPCS Procedure Panel

6.115.1 Note-HCPCS Procedure Panel Narrative

The Note-HCPCS Procedure panel is used to enter notes as to why changes were made to a specific Procedure Code.

The panel consists of a note data list and a sub-panel where updates and adds are performed.

Selecting an entry from the data list populates the sub-panel below for update/inquiry.

Alternatively, new entries can be created by clicking "Add" and entering data into the update sub-panel.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [Select the 'HCPCS' radio button] - (click on [search] and select row from search results) - or (Click on [Add] button) - [Procedure Maintenance] - [Procedure] - [Note]

6.115.2 Note-HCPCS Procedure Panel Layout

The screenshot shows a web application window titled "Note". At the top, there is a table with the following columns: Sequence Number, Clerk ID, Date, Time, and Note. The first row of data is: A, 0, R278GM, 02/15/2006, 16:59:24. Below the table, there is a text area labeled "Note *". To the right of the text area, there are input fields for "Sequence Number" (containing 0), "Date" (containing 02/15/2006), "Clerk ID" (containing R278GM), and "Time" (containing 16:59:24). At the bottom right of the window, there are two buttons: "delete" and "add".

6.115.3 Note-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to add a note for a HCPCS Procedure Code.	Button	N/A	0
Clerk ID	Identification of the user who enters the note. This value is set from the user's security profile.	Field	Alphanumeric	8
Date	Date (system date) that the note was entered.	Field	Date (MM/DD/CCYY)	8
Delete	Allows the user to delete a note from a HCPCS Procedure Code.	Button	N/A	0
Note	Free-format note text.	Field	Alphanumeric	1000

Field	Description	Field Type	Data Type	Length
Sequence Number	System assigned sequence number to uniquely identify a Procedure note.	Field	Number (Integer)	9
Time	Time (system time) that the note was entered.	Field	Number (Decimal)	6

6.115.4 Note-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add HCPCS Procedure Note text.

6.115.5 Note-HCPCS Procedure Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for Proc + 1

Clerk ID - System generated based on users login id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.115.6 Note-HCPCS Procedure Panel Accessibility

6.115.6.1 To Access the Note-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Note .	Note-HCPCS Procedure panel displays.

6.115.6.2 To Add on the Note-HCPCS Procedure Panel

Step	Action	Response
1	Click Add . Sequence Number, Date and Time automatically populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note-HCPCS Procedure information is saved.

6.115.6.3 To Update on the Note-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Note -HCPCS Procedure information is saved.

6.115.6.4 To Delete on the Note-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.116 Procedure Audit-HCPCS Procedure Panel

6.116.1 Procedure Audit-HCPCS Procedure Panel Narrative

The Procedure Audit-HCPCS Procedure panels are used to view Audit Information associated with the requested procedure code. The first panel displays the Error Code (Audit), Error Description, and the Error Type. This panel displays only one row for each Error Code, consolidating multiple occurrences of a given Error Code value into that single row. When a row is selected in the Procedure Audit panel, a Details panel is then shown. It displays all the individual audit records for the selected Error Code.

The Details panel displays the Error Code (Audit), along with the Error Description, and the Error Type. Depending on the Error Type, the procedure code range and any specific modifiers will be displayed for limit audits. The current procedure code range and any specific modifiers, the history procedure code range and any specific modifiers, the group containing any exclusion for the current procedure, and the group containing any exclusion for the history procedure will be displayed for contra audits. An Active/Inactive Indicator associated with the audit is also included. This panel is similar to the E5 screen in the legacy system, but contains new functionality not found in the legacy system.

Note the first panel is sortable by clicking on column headers. The second panel is not sortable.

Navigation Path: [Reference] – [Procedure] -[{ Select [HCPCS] as Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [Procedure Audit] – [(select row from the Procedure Audit panel)].

6.116.2 Procedure Audit-HCPCS Procedure Panel Layout

Procedure Audit														Top Nav ? & X		
Error Code	Error Description	Error Type														
5202	CHEMO ADMIN FEE/OFFICE VISIT CONTRA	CP														
5203	OFFICE VISIT/CHEMO ADMIN FEE CONTRA	CP														
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP														
5209	OFFICE VISIT/ADMIN FEE CONTRA	CP														
5218	SUPPLIES/OFFICE VISIT OR LAB CONTRA	CP														
5219	OFFICE VISIT OR LAB/SUPPLIES CONTRA	CP														
5270	CRS CLINIC CONTRA	CP														
5271	CRS CLINIC CONTRA	CP														
5402	ANCILLARY SVC/EPSTD SCREENING CONTRA	CP														
5403	EPSTD SCREENING/ANCILLARY SVC CONTRA	CP														
5522	ROUTINE PRENATAL CARE INCLUDED IN TOTAL OB CARE	CP														
5523	ROUTINE PRENATAL CARE INCLUDED IN TOTAL OB CARE	CP														
5524	ROUTINE POST PARTUM CARE PART OF TOTAL OB	CP														
5525	ROUTINE POST PARTUM CARE PART OF TOTAL OB	CP														
5614	PHYSICIAN VISIT/DIALYSIS PROCEDURE CONTRA	CP														
5615	DIALYSIS PROCEDURE/PHYSICIAN VISIT CONTRA	CP														
5626	HOSPITAL VISIT/PROFESSIONAL COMPONENT CONTRA	CP														
5627	HOSPITAL VISIT/PROFESSIONAL COMPONENT CONTRA	CP														
5646	ROUTINE CARE INCLUDED IN SURGERY FEE	CP														
5647	SURGERY FEE INCLUDES ROUTINE CARE	CP														
1 2 Next >																
The rows shown below reflect the selected row above.																
Error Code	Error Description	Error Type	Limit Proc Code From	Limit Proc Code To	Limit Modifier	Limit Group	Current Proc Code From	Current Proc Code To	Current Modifier	History Proc Code From	History Proc Code To	History Modifier	Current Group	History Group	Active	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					90471	90471	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					93566	93566	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					24998	24998	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					96360	96379	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					90460	90460	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					90779	90788	**	99201	99215	**	0	5208	A	
5208	ADMIN FEE/OFFICE VISIT CONTRA	CP					90760	90771	**	99201	99215	**	0	5208	A	

6.116.3 Procedure Audit-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Active	Indicates whether the Audit is A - Active or I - Inactive. If two or more row exists for an Audit, one being Active and another being Inactive the overall status of the Audit would be Active as at least one row is active.	Field	Character	1
Current Group	Code that categorizes the HCPCS Procedure Codes into a particular Current group.	Field	Number(Integer)	9
Current Modifier	Current Modifier associated with the procedure code.	Field	Character	2
Current Proc Code From	A lower range of code which identifies current medical, dental or DME procedure. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	6
Current Proc Code To	A higher range of code which identifies a Current medical, dental or DME procedure service. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	6
Error Code	The Error Code associated with the Procedure Code.	Field	Number (Integer)	4
Error Description	The Description of Error Code.	Field	Character	50
Error Type	The type of Audit.	Field	Character	2
History Group	Code that categorizes the HCPCS Procedure Codes into a particular History group.	Field	Number(Integer)	9
History Modifier	History Modifier associated with the Procedure Code.	Field	Character	2
History Proc code From	A lower range of code which identifies History medical, dental or DME procedure. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	6
History Proc code To	A lower range of code which identifies History medical, dental or DME procedure. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	6

Field	Description	Field Type	Data Type	Length
Limit Group	Code that categorizes the HCPCS Procedure Codes into a particular group.	Field	Number (Integer)	9
Limit Modifier	Modifier associated with the Procedure Code.	Field	Character	5
Limit Proc Code From	A lower range of code which identifies a medical, dental or DME procedure. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	5
Limit Proc Code To	A higher range of code which identifies a medical, dental or DME procedure service. If the range only covers one HCPCS Procedure Code, the From and To codes are the same.	Field	Number (Integer)	5

6.116.4 Procedure Audit-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note the first panel is sortable by clicking its column headers; the second panel is not sortable.				

6.116.5 Procedure Audit-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.116.6 Procedure Audit-HCPCS Procedure Panel Accessibility

6.116.6.1 To Access the Audit-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Procedure Audit .	Procedure Audit-HCPCS Procedure panel displays.
8	Click any row in the Procedure Audit panel.	A detailed panel displays, showing all the Procedure Audit records for the selected Error

Step	Action	Response
		Code in the panel above.

6.117 Reimbursement Rules-HCPCS Procedure

6.117.1 Reimbursement Rules- HCPCS Procedure Narrative

The Reimbursement Rules-HCPCS Procedure panel is used to view the Reimbursement Agreement information for a specific HCPCS procedure code.

This panel is display only.

Navigation Path: [Reference] – [Procedure] - [{Select [HCPCS] as [Search Type and click on 'search' button}] - [(select row from search results)] - [Procedure Maintenance-Procedure] - [Reimbursement Rules]

6.117.2 Reimbursement Rules-HCPCS Procedure Panel Layout

Reimbursement Rules								Top	Nav	?	⌵	⌵
01/01/1900 10/31/2000	Restriction Choices											
	Rule	Claim Type	Perf Prov Type/Spec-Primary	Current Benefit Plan	Bill Prov Type/Spec-Primary	Pricing Indicator	Rate Type	Greater Than Billed				
	i5050	B	11/111, 11/118	(QONLY, XIXQ)		COPDTL	DEF	Y				
	i5049	B	11/111, 11/118, 26/000	QONLY, XIXQ		COPDTL	DEF	Y				
	i5052	B	26/000	(QONLY, XIXQ)		PTBDT2	DEF	Y				
	i5051	B	(11/111, 11/118, 26/000)			PTBDT2	DEF	Y				
	i3114	C			11/111, 11/118	COPDED	DEF	Y				
	i3115	C			(11/111, 11/118)	PTBHDR	DEF	Y				
i57779	M				ANESTH	DEF						
11/01/2000 12/31/2299	Restriction Choices											
	Rule	Claim Type	Perf Prov Type/Spec-Primary	Current Benefit Plan	Bill Prov Type/Spec-Primary	Pricing Indicator	Rate Type	Greater Than Billed				
	i5050	B	11/111, 11/118	(QONLY, XIXQ)		COPDTL	DEF	Y				
	i5049	B	11/111, 11/118, 26/000	QONLY, XIXQ		COPDTL	DEF	Y				
	i5052	B	26/000	(QONLY, XIXQ)		PTBDT2	DEF	Y				
	i5051	B	(11/111, 11/118, 26/000)			PTBDT2	DEF	Y				
	i3103	C			01/000, 11/000	HEADER	DEF	Y				
	i3104	C			(01/000, 11/000)	PTBHDR	DEF	Y				
i57779	M				ANESTH	DEF						

6.117.3 Reimbursement Rules-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Bill Prov Type/Spec-Primary	It provides the Billing Provider Type/Specialty value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included.	Field	N/A	0
Claim Type	It provides the Claim Type values that are to be included for this rule. The possible Claim Type values are those that pulled from the Codes-Claim Type panel.	Field	N/A	0

Field	Description	Field Type	Data Type	Length
Current Benefit Plan	It provides the Current Benefit Plan value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included. The possible Benefit Plan values are on the Recipient Plan-Benefit Administration panel.	Field	N/A	0
Dates	These are the effective and end dates for this rule.	Field	Date (MM/DD/CCYY)	8
Greater Than Billed	Indicates if the amount is greater than what was billed.	Field	Character	3
Perf Prov Type/Spec Primary	It provides the Performing Provider Type/Specialty value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included.	Field	N/A	0
Pricing Indicator	Indicates if there is a pricing indicator selected for this rule.	Field	N/A	0
Pricing Modifier	Pricing Modifier requirement for claims. Possible values are N - Pay Billed Amount, Y - Pay greater than Billed Amount & Z - Zero Pay Billed Amount.	Field	N/A	0
Rate Type	Indicates what type of Rate Type is selected for this rule. The Rate Type values are those found on the Codes-Rate Type panel.	Field	N/A	0
Rule	It provides the Rule identification.	Field	N/A	0

6.117.4 Reimbursement Rules-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.117.5 Reimbursement Rules-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.117.6 Reimbursement Rules-HCPCS Procedure Panel Accessibility

6.117.6.1 To Access the Reimbursement Rules-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS .	
4	Click Search .	Reference Procedure Search Results panel displays.
5	Select row from data list.	Procedure Information and Maintenance panels display.
6	Click Reimbursement Rules .	Reimbursement Rules-HCPCS Procedure panel displays.

6.118 Restriction Base Information-HCPCS Procedure Panel

6.118.1 Restriction Base Information-HCPCS Procedure Panel Narrative

The Restriction Base Information- HCPCS Procedure panel is used to maintain HCPCS procedure code restriction information at the base code level.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Procedure (Search)] - (Select [HCPCS] as [Search Type and click on [search] button) - (select row from search results)- [Procedure Maintenance] - [Procedure] - [Restriction] - [Restriction Base Information]

6.118.2 Restriction Base Information-HCPCS Procedure Panel Layout

Effective Date	End Date	Confidential	CLIA Exempt	From-Thru OK	Lifetime	Pregnancy	Family Planning	Follow up Days	Attachment
01/01/2005	12/31/2299	N	Y	N	N	N	0	N	

Select row above to update -or- click Add button below.

Effective Date: End Date:
Confidential: Pregnancy:
CLIA Exempt: Family Planning:
From-Thru OK: Follow up Days:
Lifetime: Attachment:

delete add

6.118.3 Restriction Base Information-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add a new restriction to this procedure.	Button	N/A	0
Attachment	Indicates whether attachments are required for the procedure.	Combo Box	Drop Down List Box	0
CLIA Indicator	Indicates if a procedure requires CLIA certification.	Combo Box	Drop Down List Box	0
Confidential	An indication that this procedure is to be confidential.	Combo Box	Drop Down List Box	0
Delete	Allows user to mark a restriction to be removed from this procedure.	Button	N/A	0
Effective Date	The date procedure limitations become effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date procedure limitations become invalid (no longer active) for claims processing.	Field	Date (MM/DD/CCYY)	8
Family Planning	Indicates if a medical procedure is related to family planning.	Combo Box	Drop Down List Box	0

Field	Description	Field Type	Data Type	Length
Follow up Days	This field represents the number of days before an E&M (visit) procedure can be paid, since it was included as part of the original surgery that was performed.	Field	Number (Integer)	4
From-Thru OK	Yes/No indicator used in claims process to determine if the procedure may be billed with From and Through dates of service.	Combo Box	Drop Down List Box	0
Lifetime	Indicates if a procedure can only occur once in the lifetime of a recipient.	Combo Box	Drop Down List Box	0
Pregnancy	Indicates if a medical procedure is related to a pregnancy.	Combo Box	Drop Down List Box	0

6.118.4 Restriction Base Information-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Attachment	Field	1	Attachment is required.	Select an option from the Attachment list.
CLIA Indicator	Field	1	CLIA exempt is required.	Select option from CLIA Exempt indicator.
Confidential	Field	1	Confidential is required.	Select option from Confidential indicator.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. Enter a valid Effective Date that is less than or equal to the end date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Verify Keying. Make sure dates do not overlap with an existing segment.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be >= 01/01/1900.
	Field	4	Invalid Date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	Effective date is required.	Verify keying. Entry is required.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	End Date must be >= to Effective Date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Verify keying. The date range must not overlap an existing segment.

Field	Field Type	Error Code	Error Message	To Correct
	Field	3	End Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be >= 01/01/1900.
	Field	4	Invalid Date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	End Date is required.	Enter a valid End Date.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Family Planning	Field	1	Family Planning is required.	Choose Yes or Nor for Family Planning.
Follow up Days	Field	1	Follow up Days is required.	Enter a valid numeric value.
	Field	2	Enter a valid value.	Enter a valid numeric value.
From-Thru OK	Field	1	From-Thru OK is required.	Pick one From-Thru OK indicator option.
Lifetime	Field	1	Lifetime is required.	Pick one from Lifetime indicator.
Pregnancy	Field	1	Pregnancy is required.	Pick one from Pregnancy indicator.

6.118.5 Restriction Base Information-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.118.6 Restriction Base Information-HCPCS Procedure Panel Accessibility

6.118.6.1 To Access the Restriction Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results display.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Restriction .	Restriction Maintenance and Information panels display.
8	Click Restriction Base Information .	Restriction Base Information-HCPCS Procedure panel displays.

6.118.6.2 To Add on the Restriction Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Effective Date in MM/DD/CCYY format.	
3	Select Confidential from drop down list box.	
4	Select CLIA Exempt from drop down list box.	
5	Select From-Thru OK from drop down list box.	
6	Select Lifetime from drop down list box.	
7	Enter End Date in MM/DD/CCYY format.	
8	Select Pregnancy from drop down list box.	
9	Select Family Planning from drop down list box.	
10	Enter Follow up Days .	
11	Select Attachment from drop down list box.	
12	Click Save .	Restriction Base Information-HCPCS Procedure information is saved.

6.118.6.3 To Update on the Restriction Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Restriction Base Information-HCPCS Procedure information is saved.

6.118.6.4 To Delete on the Restriction Base Information-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.119 Tooth-HCPCS Procedure Panel

6.119.1 Tooth-HCPCS Procedure Panel Narrative

The Tooth Restriction panel is used to update procedure restrictions for tooth numbers. All entered segments are considered valid restrictions for the procedure.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Procedure] - (Select [HCPCS] as [Search Type and click on [search] button) - (select row from search results) - [Procedure Maintenance] - [Procedure] - [Restriction] - [Tooth]

6.119.2 Tooth-HCPCS Procedure Panel Layout

Tooth Number	Effective Date	End Date
A		12/31/2299
A K LOWER LEFT SECOND PRIMARY MOLAR	11/13/2005	12/31/2299
A 54 Upper right 4th Molar (permanent)	12/04/2006	12/31/2299
A 51 Between or alongside #21	09/25/2006	12/31/2299
A 11 UPPER LEFT CANINE (CUSPID)	03/12/2006	12/31/2299
A 27 LOWER RIGHT CANINE - CUSPID	10/14/2006	12/31/2299
A P LOWER RIGHT CENTRAL INCISOR	10/07/2000	12/31/2299
A 7 UPPER RIGHT LATERAL INCISOR	04/23/2007	12/31/2299
A		12/31/2299
A 28 LOWER RIGHT FIRST PREMOLAR-1ST BICUSPID	02/14/2006	12/31/2299

1 2 Next >

Type data below for new record.

Tooth Number* Effective Date* End Date* 12/31/2299

delete add

6.119.3 Tooth-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to enter data and create a new Tooth Restriction.	Button	N/A	0
Delete	Allows user to mark a Tooth Restriction to be removed from this procedure.	Button	N/A	0
Effective Date	Indicates the date a Tooth Restriction becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	Indicates the date a Tooth Restriction become invalid for claims processing.	Field	Date (MM/DD/CCYY)	8
Tooth Number	Drop down list that indicates the number of the tooth and its description that is restricted to a specific procedure code. Valid values include: A-T = primary 0-32 = permanent.	Combo Box	Drop Down List Box	0

6.119.4 Tooth-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter a valid Effective Date that is less than or equal to the end date.
	Field	2	Effective Date can not overlap.	Date segments may not overlap for the same tooth number.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	4	Invalid date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	Effective date is required.	Verify keying. Entry is required.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. The Effective Date must be sequentially before the end date.
	Field	2	Effective Date can not overlap.	Verify dates against existing segment.
	Field	3	End Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	4	Invalid date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	End date is required.	Verify keying. Entry is required.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Tooth Number	Field	1	A valid Tooth Number Code is required.	Select a Tooth number from the drop down list.

6.119.5 Tooth-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.119.6 Tooth-HCPCS Procedure Panel Accessibility

6.119.6.1 To Access the Tooth-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select HCPCS as search type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Restriction .	Restriction Maintenance and Information panels display.
8	Click Tooth .	Tooth-HCPCS Procedure panel displays.

6.119.6.2 To Add on the Tooth-HCPCS Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Tooth Number from drop down list box.	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Enter End Date in MM/DD/CCYY format.	
5	Click Save .	Tooth-HCPCS Procedure information is saved.

6.119.6.3 To Update on the Tooth-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Tooth-HCPCS Procedure information is saved.

6.119.6.4 To Delete on the Tooth-HCPCS Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.120 Tooth Quadrant-HCPCS Procedure Panel

6.120.1 Tooth Quadrant-HCPCS Procedure Panel Narrative

The Tooth Quadrant panel is used to maintain tooth quadrants associated to a given procedure code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Procedure (Search)] - (Select [HCPCS] as [Search Type] and click on [search] and select row from search results)- [Procedure Maintenance] - [Procedure] - [Restriction] - [Tooth Quadrant]

6.120.2 Tooth Quadrant-HCPCS Procedure Panel Layout

Tooth Quadrant	Effective Date	End Date
A		12/31/2299
L LEFT	11/20/1999	12/31/2299
R RIGHT	12/30/1999	12/31/2299
11 Tooth Removed	11/19/1999	12/31/2299
2 MANDIBULAR AREA	12/30/2006	12/31/2299

Type data below for new record.

Tooth Quadrant* 40 LOWER RIGHT QUADRANT Effective Date* 01/01/2007 End Date* 12/31/2299

delete add

6.120.3 Tooth Quadrant-HCPCS Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to create a new Tooth Quadrant Restriction for the procedure.	Button	N/A	0
Delete	Allows user to delete a Tooth Quadrant Restriction from the procedure.	Button	N/A	0
Effective Date	Indicates the date a Tooth Quadrant Restriction becomes effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	Indicates the date a Tooth Quadrant Restriction become invalid for claims processing.	Field	Date (MM/DD/CCYY)	8
Tooth Quadrant	Indicates the number of the Tooth Quadrant, which was serviced, and the description.	Combo Box	Drop Down List Box	0

6.120.4 Tooth Quadrant-HCPCS Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter a valid Effective Date that is less than or equal to the End date.
	Field	2	Effective Date can not overlap.	Verify Keying. Date should not overlap existing segment.
	Field	3	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	4	Invalid Date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	Effective Date is required.	Verify keying. Entry is required.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. The Effective Date must be sequentially before the End Date.
	Field	2	Effective Date can not overlap.	Verify Keying. Date should not overlap existing segment.
	Field	3	End Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	4	Invalid Date.	Verify keying. The date must be in MM/DD/CCYY format.
	Field	5	End Date is required.	Verify keying. Entry is required.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Tooth Quadrant	Field	1	A valid Tooth Quadrant is required.	Select a Tooth Quadrant from the drop down list.

6.120.5 Tooth Quadrant-HCPCS Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.120.6 Tooth Quadrant-HCPCS Procedure Panel Accessibility

6.120.6.1 To Access the Tooth Quadrant-HCPCS Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Enter search criteria.	
4	Select HCPCS as search type.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Restriction .	Restriction Maintenance and Information panels display.
8	Click Tooth Quadrant .	Tooth Quadrant-HCPCS Procedure panel displays.

6.120.6.2 To Add on the Tooth Quadrant-HCPCS Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Tooth Quadrant from drop down list box.	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Enter End Date in MM/DD/CCYY format.	
5	Click Save .	Tooth Quadrant-HCPCS Procedure information is saved.

6.120.6.3 To Update on the Tooth Quadrant-HCPCS Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Tooth Quadrant-HCPCS Procedure information is saved.

6.120.6.4 To Delete on the Tooth Quadrant-HCPCS Procedure Panel

Step	Action	Response
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Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.121 Procedure Mini Search-ICD Procedure Panel

6.121.1 Procedure Mini Search-ICD Procedure Panel Narrative

The Procedure ICD Mini-Search panel is used to search for ICD procedure codes from the ICD Information panel.

This panel is inquiry only.

Navigation Path:[Reference] – [Procedure] - [select ICD radio button as 'Search Type', click on 'search'] - [click on any row from the list]

6.121.2 Procedure Mini Search-ICD Procedure Panel Layout

Next Search By:	ICD	<input type="text"/>	<input type="button" value="search"/>	<input type="button" value="clear"/>	<input type="button" value="adv search"/>
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6.121.3 Procedure Mini Search-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	Takes the user back to Procedure main search page so user may enter additional search criteria.	Button	N/A	0
Clea	Clears the ICD field so user may key-in new search criteria.	Button	N/A	0
ICD	ICD procedure code to use as search criteria. The ICD Procedure Code data set contains International Classification of Diseases, Ninth and Tenth Revision, Clinical Modification procedure codes used for inpatient hospital billing and describe procedures used for the treatment of illness and injury.	Field	Character	7
Search	Initiates the search for a ICD procedure matching the ICD code keyed in.	Button	N/A	0

6.121.4 Procedure Mini Search-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
ICD	Field	1	ICD Code does not exist.	Verify keying. Enter a valid ICD code.

6.121.5 Procedure Mini Search-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.121.6 Procedure Mini Search-ICD Procedure Panel Accessibility

6.121.6.1 To Access the Procedure Mini-Search-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click	Main Menu page displays.

Step	Action	Response
	Login.	
2	Point to Reference and click Procedure.	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search.	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Mini-Search-ICD panel displays.

6.121.6.2 To Navigate the Procedure Mini-Search-ICD Procedure Panel

Step	Action	Response
1	Click on hyperlink to select an area to add or modify.	Select panel displays.

6.122 Procedure Information-ICD Procedure Panel

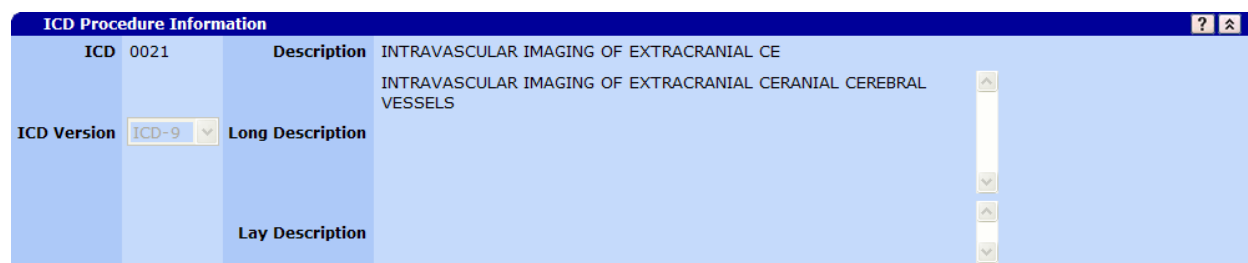
6.122.1 Procedure Information-ICD Procedure Panel Narrative

The ICD Procedure Information is used to view ICD Procedure code and descriptions. The ICD Procedure Code data set contains International Classification of Diseases, Ninth and Tenth Revision, Clinical Modification procedure codes used for inpatient hospital billing and describe procedures used for the treatment of illness and injury. ICD procedure codes are composed of codes with either 3 or 4 digits. Codes with two digits are included in ICD as the heading of a category of codes that may be further subdivided by the use of third and/or fourth digits, which provide greater detail.

This panel is display only.

Navigation Path: [Reference] – [Procedure] - [select ICD radio button for 'Search Type'. Click on 'search' button] - [(select row from search results)]

6.122.2 Procedure Information-ICD Procedure Panel Layout



6.122.3 Procedure Information-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	A short medical description of a specific, surgical or diagnostic procedure which is performed for the express purpose of identification or treatment of the patient's condition.	Field	Character	40
ICD	The ICD procedure code used to identify therapeutic, diagnostic and prophylactic procedures that can be provided to patients in hospitals.	Field	Character	4
ICD Version	Code to denote which version of the ICD procedure code set is being referenced.	Field	Character	1
Lay Description	The layman description of the medical procedure that was performed.	Field	Character	100
Long Description	A long medical description of a specific, surgical or diagnostic procedure which is performed for the express purpose of identification or treatment of the patient's condition.	Field	Character	400

6.122.4 Procedure Information-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.122.5 Procedure Information-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.122.6 Procedure Information-ICD Procedure Panel Accessibility

6.122.6.1 To Access the Procedure Information- ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Information panel displays.

6.123 Procedure Maintenance-ICD Procedure Panel

6.123.1 Procedure Maintenance-ICD Procedure Panel Narrative

The Procedure Maintenance-ICD panel contains links to various ICD Procedure panels.

This panel is inquiry only.

Navigation Path: [Reference] - [Procedure] - (Select [ICD] as [Search Type]) - (Click on [Search] button) - (Select row from search results) - [ICD Procedure Maintenance]

6.123.2 Procedure Maintenance-ICD Procedure Panel Layout

The screenshot shows the 'ICD Procedure Maintenance' panel. The title bar is 'ICD Procedure Maintenance'. Below it is a subtitle 'Select an area to add or modify'. The main area contains several links: 'Base Information', 'Benefit Plan Coverage Rules', 'Contract Billing Rules', 'Diagnosis Restriction', 'Group', 'Note', 'Reimbursement Rules', and 'Restriction'. At the bottom are three buttons: 'save', 'cancel', and 'new'.

6.123.3 Procedure Maintenance-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Base Information	Opens the ICD Procedure Base Information panel.	Hyperlink	N/A	0
Benefit Plan Coverage Rules	Opens the ICD Procedure Benefit Plan Coverage Rules panel.	Hyperlink	N/A	0
Cancel	Cancels all additions/deletions/changes made to any panel in the maintenance area (panels with hyperlinks on this Maintenance panel).	Button	N/A	0
Contract Billing Rules	Opens the ICD Procedure Contract Billing Rules panel.	Hyperlink	N/A	0
Diagnosis Restriction	Opens the ICD Procedure Diagnosis Restriction panel.	Hyperlink	N/A	0
Group	Opens the ICD Procedure Group panel.	Hyperlink	N/A	0
New	Opens the panels needed to create a new ICD Procedure.	Button	N/A	0
Note	Opens the ICD Procedure Note panel.	Hyperlink	N/A	0
Reimbursement Rules	Opens the ICD Procedure Reimbursement Rules panel.	Hyperlink	N/A	0
Restriction	Opens the ICD Procedure Restriction panel.	Hyperlink	N/A	0
Save	Saves all additions/deletions/changes made to any panel in the maintenance area (panels with hyperlinks on this Maintenance panel).	Button	N/A	0

6.123.4 Procedure Maintenance-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.123.5 Procedure Maintenance-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.123.6 Procedure Maintenance-ICD Procedure Panel Accessibility

6.123.6.1 To Access the Procedure Maintenance- ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance panel displays.

6.124 Base Information-ICD Procedure Panel

6.124.1 Base Information-ICD Procedure Panel Narrative

The Base Information-ICD 9-CM Procedure panel is used to maintain ICD Procedure base information. The ICD Procedure Code data set contains International Classification of Diseases, Ninth and Tenth Revision; Clinical Modification Procedure Codes used for inpatient hospital billing and describe procedures used for the treatment of illness and injury. ICD Procedure Codes are composed of codes with either 3 or 4 digits. Codes with two digits are included in ICD as the heading of a category of codes that may be further subdivided by the use of third and/or fourth digits, which provide greater detail.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [select ICD as 'Search Type' and click on 'search' button] - [(select row from search results)] - [ICD Procedure Maintenance] - [Base Information]

6.124.2 Base Information-ICD Procedure Panel Layout

The screenshot shows a web-based form titled "Base Information". It contains several input fields and a "delete" button. The fields are: "ICD*" with value "F13ZD3Z", "ICD-10" with a dropdown menu, "Description*" with a text area containing "TYMPANOMETRY ASSESSMENT USING TYMPANOMET", "Long Description*" with a text area containing "TYMPANOMETRY ASSESSMENT USING TYMPANOMETER", "Lay Description" with a text area, "Class" with a dropdown menu showing "NA, none", and "MC Service Class" with a dropdown menu showing "NONE". A "delete" button is located at the bottom right of the form.

6.124.3 Base Information-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Class	Indicates the category of procedure, operative or non operative, the Procedure Code falls within. Describes the operative or non operative class of a procedure. 1 = Class 1, surgery, 2 = Class 2, significant procedure, 3 = Class 3 significant procedure, 4 = Class 4, other.	Combo Box	Drop Down List Box	0
Delete	Allows the user to delete an ICD Procedure Code.	Button	N/A	0
Description	A short medical description of a specific, surgical or diagnostic procedure which is performed for the express purpose of identification or treatment of the patient's condition.	Field	Characters	40

Field	Description	Field Type	Data Type	Length
ICD	The ICD Procedure Code used to identify the therapeutic, diagnostic and prophylactic procedures that were provided to patients in hospitals.	Field	Character	7
ICD Version	Code to denote which version of the ICD procedure code set is being referenced. The valid values are BLANK, ICD-9 and ICD-10.	Combo Box	Drop Down List Box	1
Lay Description	The layman description of the medical procedure that was performed.	Field	Character	100
Long Description	A long medical description of a specific, surgical or diagnostic procedure which is performed for the express purpose of identification or treatment of the patient's condition.	Field	Character	400
MC Service Class	The Managed Care Service Class indicates the type of services provided.	Combo Box	Drop Down List Box	0

6.124.4 Base Information-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	Description is required.	Verify Keying. Type in short description.
ICD	Field	1	ICD is required.	Enter a valid code for ICD.
	Field	2	Required input must be between 2 and 7 characters in length.	Verify Keying. Type in 2 digit code or more in ICD field.
	Field	3	A duplicate record cannot be saved.	A record already exists for this ICD code. Verify Keying. Enter code which is not in the database.
	Field	6	A valid Procedure ICD Lim is required.	ICD Lim must have a value.
ICD Version	Combo Box	1	ICD Version is required.	Select value from ICD Version dropdown.
Long Description	Field	1	Long Description is required.	Verify Keying. Type in long description.
MC Service Class	Field	1	A valid Mc Svc Class is required.	Select an MC Service Class from drop down list.

6.124.5 Base Information-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.124.6 Base Information-ICD Procedure Panel Accessibility

6.124.6.1 To Access the Base Information-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Base Information .	Base Information-ICD panels display.

6.124.6.2 To Add on the Base Information- ICD Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter ICD .	
3	Enter Description .	
4	Enter Long Description .	
5	Enter Lay Description .	
6	Select Class from drop down list box.	
7	Select MC Service Class from drop down list box.	
8	Click Save .	Base Information-ICD Procedure information is saved.

6.124.6.3 To Update on the Base Information-ICD Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information-ICD Procedure information is saved.

6.124.6.4 To Delete on the Base Information-ICD Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.125 Benefit Plan Coverage Rules-ICD Procedure Panel

6.125.1 Benefit Plan Coverage Rules-ICD-Procedure Panel Narrative

The Benefit Plan Coverage Rules-Diagnosis panel is used to view the recipient plan coverage information for a specific diagnosis code. This panel is display only.

Navigation Path: [Reference] – [Procedure] - [select ICD as 'Search Type' and click on 'search' button] - [(select row from search results)] - [ICD Procedure Maintenance] - [Benefit Plan Coverage Rules]

6.125.2 Benefit Plan Coverage Rules-ICD Procedure Panel Layout

Benefit Plan Coverage Rules								
Recipient Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date
ALL	ALL BENEFIT PLANS	Benefit Plan	None	DEFAULT	No	No	01/02/1900	12/31/2299
QONLY	QMB Only	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
SBRW	SOBRA Pregnant Women	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TAWV	Technology Assisted Waive	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
TXIX	Full Medicaid	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299
XIXQ	Full Medicaid with QMB PI	Benefit Plan	None	DEFAULT	No	No	01/01/1900	12/31/2299

6.125.3 Benefit Plan Coverage Rules-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Identifies the associated list of claim types as included or excluded for the covered benefit.	Combo Box	Drop Down List Box	0
Copay Allowed	Yes/No indicator used to identify programs that qualify for copay calculations during claims payment determination.	Field	Character	3
Description	Description of the Recipient Plan.	Field	Character	50
Effective Date	Date the Recipient Plan becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective date.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Recipient Plan becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the end date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this benefit plan.	Field	Character	30
Plan Type	Type of plan is either an Assignment Plan (ASGN) or a Benefit Plan (BNFT).	Field	Character	15
Recipient Only	Yes/No indicator used to identify programs that are used for recipient enrollment only. No services are covered by the program.	Field	Character	3
Recipient Plan	Code that identifies the recipient plan that is supported in the system.	Field	Character	5

6.125.4 Benefit Plan Coverage Rules-ICD Procedure Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.125.5 Benefit Plan Coverage Rules-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.125.6 Benefit Plan Coverage Rules-ICD Procedure Panel Accessibility

6.125.6.1 To Access the Benefit Plan Coverage Rules-ICD Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Benefit Plan Coverage Rules .	Benefit Plan Coverage Rules-ICD panel displays.

6.126 Contract Billing Rules-ICD Procedure Panel

6.126.1 Contract Billing Rules- ICD Procedure Panel Narrative

The Contract Billing Rules- ICD panel is used to display Provider Contracts applicable to procedure codes. This panel is display only.

Navigation Path: [Reference] – [Procedure] - [select ICD as 'Search Type' and click on 'search' button] - [(select row from search results)] - [ICD Procedure Maintenance] - [Contract Billing Rules]

6.126.2 Contract Billing Rules-ICD Procedure Panel Layout

Contract Billing Rules							Top	X
Provider Contract	Financial Payer	Description	Claim Type Edits	Effective Date	End Date	Inactive Date		
ADMH	DEFAULT	ADMH/MR		01/01/1900	12/31/2299	12/31/2299		
ADSS	DEFAULT	E and D		01/01/1900	12/31/2299	12/31/2299		
ASC	DEFAULT	ASC		01/01/1900	12/31/2299	12/31/2299		
AUDIO	DEFAULT	Audiology		01/01/1900	12/31/2299	12/31/2299		
CARE	DEFAULT	Care Coordination		01/01/1900	12/31/2299	12/31/2299		
CHIRO	DEFAULT	Chiropractic		01/01/1900	12/31/2299	12/31/2299		
CORF	DEFAULT	Rehab Hospital		01/01/1900	12/31/2299	12/31/2299		
CRNA	DEFAULT	CRNA		01/01/1900	12/31/2299	12/31/2299		
CRS	DEFAULT	CRS		01/01/1900	12/31/2299	12/31/2299		
DME	DEFAULT	Durable Med Equip		01/01/1900	12/31/2299	12/31/2299		
1 2 3 4 5 6 Next >								

6.126.3 Contract Billing Rules- ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Attribute indicates what type of claim type to program editing is to be performed. If the indicator is set to 'N' (non), no claim type to program editing is performed. If the indicator is set to 'I' (include), only the claim types listed are billable for the specified program. If the indicator is set to 'E' (exclude), the claim types listed are not billable for the specified program.	Field	Character	1
Description	Description of the provider contract.	Field	Character	30
Effective Date	Date the Provider Contract becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective dates.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Provider Contract becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the end date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this provider contract.	Field	Character	30
Inactive Date	Date/Time the Provider Contract can no longer be used regardless of dates of service on the claim.	Field	Date (MM/DD/CCYY)	8

Field	Description	Field Type	Data Type	Length
Provider Contract	Classification of services a Provider can bill. A provider may have multiple contracts.	Field	Character	5

6.126.4 Contract Billing Rules- ICD Procedure Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.126.5 Contract Billing Rules-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.126.6 Contract Billing Rules-ICD Procedure Panel Accessibility

6.126.6.1 To Access the Contract Billing Rules-ICD Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Contract Billing Rules .	Contract Billing Rules-ICD panel displays.

6.127 Diagnosis Restriction-ICD Procedure Panel

6.127.1 Diagnosis Restriction-ICD Procedure Panel Narrative

The ICD Procedure Diagnosis Restriction panel is used to restrict specific ICD Procedure Codes to certain diagnosis. Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure] - [(Add button) OR [(select ICD as 'Search Type') and (click on 'search' button))] (select row from search results)] - [ICD Procedure Maintenance] - [Diagnosis Restriction]

6.127.2 Diagnosis Restriction-ICD Procedure Panel Layout

ICD Version	Diagnosis From	Diagnosis To	Effective Date	End Date	Valid/Invalid
A				12/31/2299	Valid
9	0019	0020	09/19/2012	12/31/2012	Valid
0	0030	257	09/19/2012	12/31/2299	Valid
9	603	604	09/19/2012	12/31/2012	Valid
9	6030	6031	10/02/2013	12/31/2013	Valid
9	6040	6049	01/01/2014	12/31/2014	Valid

Type data below for new record.

Diagnosis From* [Search] [] Effective Date* []

Diagnosis To* [Search] [] End Date* 12/31/2299

Valid/Invalid* Valid []

[delete] [add]

6.127.3 Diagnosis Restriction-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to enter data and add a new Diagnosis Restriction to this procedure.	Button	N/A	0
Delete	Allows user to mark a Diagnosis Restriction to be removed from this procedure.	Button	N/A	0
Diagnosis From [Search]	Lower limit of a range of diagnosis codes.	Field	Character	7
Diagnosis To [Seach]	Upper limit of a range of diagnosis codes.	Field	Character	7
Effective Date	The date of service a Diagnosis Code Restriction for an ICD procedure becomes active for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service a Diagnosis Code Restriction for an ICD procedure is no longer active for claims processing.	Field	Date (MM/DD/CCYY)	8
ICD Version	Displays ICD Version for the respective diagnosis code. Valid values include: '9' for ICD-9 and '0' for ICD-10.	Field	Character	1

Field	Description	Field Type	Data Type	Length
Valid/Invalid	Indicates if diagnosis code range is valid/invalid for an ICD Procedure code.	Combo Box	Drop Down List Box	0

6.127.4 Diagnosis Restriction-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. The Effective Date must be sequentially before the end date.
	Field	2	Diag Range Segment Dates cannot overlap.	Verify keying. Dates cannot overlap with an existing date range and an existing ICD Version for a given Diagnosis code range.
	Field	3	Invalid Date.	Verify keying. Date must be numeric and entered in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	5	Effective Date is required.	Verify keying. Entry is required.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Verify keying. Date must be before 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. The Effective Date must be sequentially before the end date.
	Field	2	Diag Range Segment Dates cannot overlap.	Verify keying. Dates cannot overlap with an existing date range and an existing ICD Version date range for a given Diagnosis code range.
	Field	3	Invalid Date.	Verify keying. Date must be entered in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	5	End Date is required.	Enter a valid End Date.
	Field	6	End Date must be less than or equal to 12/31/2299.	Verify keying. Date must be before 12/31/2299.
Valid/Invalid	Field	1	Valid/Invalid is required.	Must be set to valid or invalid.

Field	Field Type	Error Code	Error Message	To Correct
	Field	2	Diag Valid/Invalid Segments cannot overlap.	Verify selection. Should not overlap Diagnosis valid/invalid segments within a Diagnosis Code in an existing date range and ICD Version.
Diagnosis From	Field	1	A valid Diagnosis From is required.	Verify keying. Check the Diagnosis Selection Window for valid diagnosis.
	Field	2	'Diagnosis From' code cannot be greater than 'Diagnosis To' code.	Select a different Diagnosis From/Diagnosis To code.
	Field	3	Diagnosis From and To codes are not of same ICD Version.	Select Diagnosis From and To codes of same ICD Version.
	Field	4	Diagnosis From and To codes both must be either AlphaNumeric or Numeric.	Select Diagnosis From and To codes of same type. i.e. both should be either AlphaNumeric or Numeric.
Diagnosis To	Field	1	A valid Diagnosis To is required.	Verify keying. Check the Diagnosis Selection Window for valid diagnosis.
	Field	2	'Diagnosis From' code cannot be greater than 'Diagnosis to' Diagnosis Code.	Select a different Diagnosis From/Diagnosis To code.
	Field	3	Diagnosis From and To codes are not of same ICD Version.	Select Diagnosis From and To codes of same ICD Version.
	Field	4	Diagnosis From and To codes both must be either AlphaNumeric or Numeric.	Select Diagnosis From and To codes of same type. i.e. both should be either AlphaNumeric or Numeric.

6.127.5 Diagnosis Restriction-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.127.6 Diagnosis Restriction-ICD Procedure Panel Accessibility

6.127.6.1 To Access the Diagnosis Restriction-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	

Step	Action	Response
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Diagnosis Restriction .	Diagnosis Restriction-ICD panels display.

6.127.6.2 To Add on the Diagnosis Restriction-ICD Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Click [Search] to locate Diagnosis From .	Diagnosis From Search panel displays.
3	Click Search .	Diagnosis From information populates on panel.
4	Click [Search] to locate Diagnosis To .	Diagnosis To Search panel displays.
5	Click Search .	Diagnosis To information populates on panel.
6	Select Valid/Invalid from drop down list box.	
7	Enter Effective Date in MM/DD/CCYY format.	
8	Enter End Date in MM/DD/CCYY format.	
9	Click Save .	Diagnosis Restriction-ICD Procedure information is saved.

6.127.6.3 To Update on the Diagnosis Restriction-ICD Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Diagnosis Restriction-ICD Procedure information is saved.

6.127.6.4 To Delete on the Diagnosis Restriction-ICD Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.128 Group-ICD Procedure Panel

6.128.1 Group ICD Procedure Panel Narrative

The Group-ICD Procedure panel is used to view all groups to which a specific ICD Procedure code has been associated. The groups are maintained via the ICD Procedure Group panels found under Reference Related Data - Other.

This panel is display only.

Navigation Path: [Reference] – [Procedure Search] - [Select ICD as 'Search Type'. Click on 'search' button] - [(select row from search results)] - [ICD Procedure Maintenance] - [Group]

6.128.2 Group- ICD Procedure Panel Layout

Group							Top	Nav	?	^	X
Group	Description	ICD Version	ICD-CM Procedure Code Range From	ICD-CM Procedure Code Range To	Effective Date	End Date					
1022	Sterilization	9	6370	6373	01/01/1900	12/31/2299					
1026	Family Planning - always	9	6370	6370	01/01/1900	12/31/2299					
5002	List for Fund Code Assign	9	6370	6370	01/01/1900	12/31/2299					
5008	List for Fund Code Assign	9	6370	6370	01/01/1900	12/31/2299					

6.128.3 Group- ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	The description of the ICD procedure group.	Field	Character	25
Effective Date	The date of service the Procedure Code becomes effective for that ICD type.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the Procedure Code is no longer effective for that ICD type.	Field	Date (MM/DD/CCYY)	8
Group	Code that categorizes a ICD Procedure into a particular group.	Field	Number (Integer)	9
ICD Version	Code to denote which version of the ICD diagnosis code set is being referenced. The valid values are BLANK, ICD-9 and ICD-10.	Field	Character	1
Procedure From	The lower range ICD Procedure Code assigned to the ICD group. If the range only covers one ICD Procedure Code, the Start and End code are the same.	Field	Character	7
Procedure To	The upper range ICD Procedure Code assigned to the ICD group. If the range only covers one ICD Procedure Code, the Start and End code are the same.	Field	Character	7

6.128.4 Group- ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.128.5 Group- ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.128.6 Group- ICD Procedure Panel Accessibility

6.128.6.1 To Access the Group-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Search Results display.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Group .	Group-ICD panels display.

6.129 Note-ICD Procedure Panel

6.129.1 Note-ICD Procedure Panel Narrative

The Note panel is used to enter notes as to why changes were made to a specific ICD procedure. Includes fields for date, time, clerk number and note sequence number.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure Search] - [select ICD] - (Click on Add button) OR (click on [search] and select row from search results) - [ICD Procedure Maintenance] - [ICD] - [Note]

6.129.2 Note-ICD Procedure Panel Layout

Sequence Number	Clerk ID	Date	Time	Note
3	RZ78GM	01/04/2006	14:22:53	NOTE 3
2	RZ78GM	01/04/2006	13:43:57	NOTE 2
1	RZ78GM	01/04/2006	13:43:38	NOTE 1

Type changes below.

Sequence Number: 3 Date: 01/04/2006

Clerk ID: RZ78GM Time: 142253

Note*: NOTE 3

delete add

6.129.3 Note-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Clerk ID	Identification of the user who entered the note. This value is set from the user's security profile.	Field	Alphanumeric	8
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Note	The actual text of the note.	Field	Alphanumeric	1000
Sequence Number	Sequence number than can uniquely identify a note.	Field	Number (Integer)	9
Time	The time the note was entered.	Field	Number (Decimal)	6

6.129.4 Note-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add ICD Procedure Note text.

6.129.5 Note-ICD Procedure Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for ICD Proc + 1

Clerk ID - System generated based on users login id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.129.6 Note-ICD Procedure Panel Accessibility

6.129.6.1 To Access the Note-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search type.	
4	Enter search criteria.	
5	Click Search .	Search Results display.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Note .	Note-ICD Procedure panel displays.

6.129.6.2 To Add on the Note-ICD Procedure Panel

Step	Action	Response
1	Click Add . Sequence Number, Date and Time automatically populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note-ICD Procedure information is saved.

6.129.6.3 To Update on the Note ICD Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	

Step	Action	Response
3	Click Save .	Note-ICD Procedure information is saved.

6.129.6.4 To Delete on the Note –ICD Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

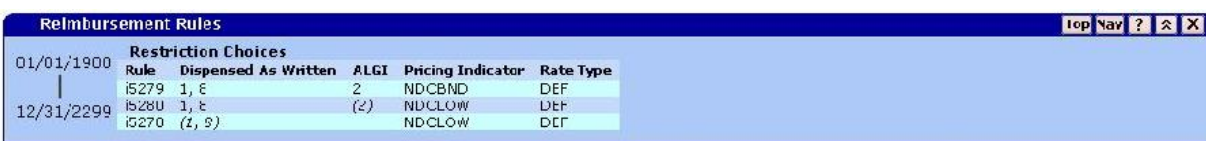
6.130 Reimbursement Rules-ICD Procedure Panel

6.130.1 Reimbursement-ICD Procedure Panel Narrative

The Reimbursement Rules-ICD Procedure panel is used to view the Reimbursement Agreement information for a specific procedure code. The information displayed is retrieved from the Reimbursement Agreement tables available through the Benefit administration panels. The panel displays all reimbursement agreements associated with the specified ICD procedure code. This panel is display only.

Navigation Path: [Reference] – [Procedure Search] - [select ICD] - (Click on Add button) OR (click on [search] and select row from search results) - [ICD Procedure Maintenance] - [ICD] - [Reimbursement Rules]

6.130.2 Reimbursement-ICD Procedure Panel Layout



The screenshot shows a window titled "Reimbursement Rules" with a table of "Restriction Choices". The table has columns for Rule, Dispensed As Written, ALGI, Pricing Indicator, and Rate Type. The data is as follows:

Rule	Dispensed As Written	ALGI	Pricing Indicator	Rate Type
01/01/1900	1, E	2	NDCBND	DEF
12/31/2299	1, E	(2)	NDCLOW	DEF
	(1, 9)		NDCLOW	DEF

6.130.3 Reimbursement-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
ALGI	It provides the ALGI value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included.	Field	N/A	0
Dates	These are the effective and end dates for this rule.	Field	Date (MM/DD/CCYY)	8
Dispensed As Written	It provides the Dispensed as Written values that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included. Possible values are: 0 - No product selection indicated; 1 - Substitution not allowed by provider; 2 - Substitution allowed- patient requested product dispensed; 3 - Substitution allowed- pharmacist selected product dispensed; 4 - Substitution allowed- generic drug not in stock; 5 - Substitution allowed- brand drug dispensed as generic; 6 - Override; 7 - Substitution not allowed- brand drug mandated by law; 8 - Substitution allowed- generic drug not available in marketplace; 9 – Other.	Field	N/A	0

Field	Description	Field Type	Data Type	Length
Pricing Indicator	Indicates if there is a pricing indicator selected for this rule.	Field	N/A	0
Rate Type	Indicates what type of Rate Type is selected for this rule. The Rate Type values are those found on the Codes-Rate Type panel.	Field	N/A	0
Rule	It provides the Rule identification.	Field	N/A	0

6.130.4 Reimbursement-ICD Procedure Panel Field Edit Error Codes

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.130.5 Reimbursement-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.130.6 Reimbursement-ICD Procedure Panel Accessibility

6.130.6.1 To Access the Reimbursement Rules-ICD Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search Type.	
4	Enter search criteria.	
5	Click Search .	Reference Procedure Search Results panel displays.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Reimbursement Rules .	Reimbursement Rules-ICD panel displays.

6.131 Restriction-ICD Procedure Panel

6.131.1 Restriction-ICD Procedure Panel Narrative

The Restriction-ICD Procedure panel is used to maintain ICD procedure code restriction information at the base code level.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Procedure Search] - [Select ICD as 'Search Type' and click on 'search' button] - [(select row from search results)] - [ICD Procedure Maintenance] - [Restriction]

6.131.2 Restriction-ICD Procedure Panel Layout

The screenshot shows a web application window titled "Restriction". At the top, there is a table with the following columns: Effective Date, End Date, Coverage, Bilateral, Gender, Operating Room, Age Min, Age Max, Nonspecific, Biopsy, and Attachment. The first row of data shows: 01/01/1964, 12/31/2299, Covered, Both, No, 0, 999, No Attachment Required. Below the table, there is a form with the following fields: Effective Date (01/01/1964), End Date (12/31/2299), Financial Payer (ALL plans), Coverage (Covered), Bilateral (Yes), Gender (Both), Operating Room (No), Age Range (0 to 999), Nonspecific (Yes), Biopsy (), and Attachment (No Attachment Required). There are "delete" and "add" buttons at the bottom right.

6.131.3 Restriction-ICD Procedure Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add a new restriction for an ICD procedure.	Button	N/A	0
Age Range From	The minimum age a recipient should be to receive this procedure.	Field	Number (Integer)	4
Age Range To	The maximum age a recipient should be to receive this procedure.	Field	Number (Integer)	4
Attachment	Indicates the type of attachment required for this procedure code.	Combo Box	Drop Down List Box	0
Bilateral	An indicator used to display if an ICD procedure code is a Bilateral procedure.	Combo Box	Drop Down List Box	0
Biopsy	Indicates if the procedure code is classified as an open or closed biopsy.	Combo Box	Drop Down List Box	0
Coverage	Indicates if the ICD procedure code is considered covered or non-covered.	Combo Box	Drop Down List Box	0
Delete	Allows user to delete an ICD Procedure Restriction.	Button	N/A	0

Field	Description	Field Type	Data Type	Length
Effective Date	The date of service the ICD procedure code limitations become effective for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the ICD procedure code limitations become invalid (no longer effective) for claims processing.	Field	Date (MM/DD/CCYY)	8
Financial Payer	The Financial payer to which this restriction applies. A Financial payer generally represents a unique organization responsible for the underwriting of the claims transactions to be paid.	Combo Box	Drop Down List Box	0
Gender	Used to indicate if a procedure is gender specific.	Combo Box	Drop Down List Box	0
Nonspecific	Indicates if the procedure code is classified as a nonspecific procedure code (a code used when more precise information is not obtainable).	Combo Box	Drop Down List Box	0
Operating Room	Used to indicate if a procedure requires the use of an operating room. This indicator is used in DRG assignment.	Combo Box	Drop Down List Box	0

6.131.4 Restriction-ICD Procedure Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Age Range From	Field	1	Enter a valid value.	Enter an Age that is numeric and greater than or equal to 0.
	Field	2	Age Min must be less than or equal to 999.	Enter a minimum age that is less than 999.
	Field	3	Age Max must be less than or equal to 999.	Enter a maximum age that is less than 999.
	Field	5	Age Range is required.	Enter a numeric age value.
Age Range To	Field	1	Age Max must be less than or equal to 999.	Enter an Age Max that is less than or equal to 999.
	Field	3	Enter a valid value.	Enter a valid Age Max value.
	Field	4	Age Range is required.	Verify keying. Enter a valid Age Max value.
Attachment	Field	1	Attachment is required.	Select an Attachment option from the list.
Bilateral	Field	1	Bilateral is required.	Choose an option from Bilateral list.

Field	Field Type	Error Code	Error Message	To Correct
Coverage	Field	1	Coverage is required.	Select a Coverage option from the list.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an Effective Date that is before the end date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Enter an Effective Date of the current segment that does not overlap the end date.
	Field	3	Invalid Date.	Enter a numeric Effective Date in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is more recent than 01/01/1900.
	Field	5	Effective date is required.	Enter an Effective Date in MM/DD/CCYY format.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an Effective Date that is sequentially before the end date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Enter an Effective Date of the current segment that does not overlap end date.
	Field	3	Invalid Date.	Enter an End Date that is numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is more recent than 01/01/1900.
	Field	5	End Date is required.	Enter a valid End Date.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Financial Payer	Field	1	A valid Financial Payer is required.	Select a Financial Payer from the list.
Gender	Field	1	Gender is required.	Select Gender from the drop down list.
Nonspecific	Field	1	Nonspecific is required.	Select an option from the Nonspecific list.
Operating Room	Field	1	Operating Room is required.	Choose yes or no for the Operating Room.

6.131.5 Restriction-ICD Procedure Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.131.6 Restriction-ICD Procedure Panel Accessibility

6.131.6.1 To Access the Restriction-ICD Procedure Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Procedure .	Reference Procedure Search panel displays.
3	Select ICD as search type.	
4	Enter search criteria.	
5	Click Search .	Reference ICDSearch Results display.
6	Select row from list of results.	Procedure Maintenance and Information panels display.
7	Click Restriction .	Restriction-ICD Procedure panel displays.

6.131.6.2 To Add on the Restriction-ICD Procedure Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Effective Date in MM/DD/CCYY format.	
3	Enter End Date in MM/DD/CCYY format.	
4	Select Coverage from drop down list box.	
5	Select Bilateral from drop down list box.	
6	Select Financial Payer from drop down list box.	
7	Select Gender from drop down list box.	
8	Select Operating Room from drop down list box.	
9	Enter Age Range .	
10	Select Nonspecific from drop down list box.	
11	Select Biopsy from drop down list box.	
12	Select Attachment from drop down list box.	
13	Click Save .	Restriction-ICD Procedure information is saved.

6.131.6.3 To Update on the Restriction-ICD Procedure Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Restriction-ICD Procedure information is saved.

6.131.6.4 To Delete on the Restriction-ICD Procedure Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.132 Reference Revenue Search-Revenue Panel

6.132.1 Reference Revenue Search-Revenue Panel Narrative

The Reference Revenue Search panel allows the user to search for a specific revenue code.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue] - [search button]

6.132.2 Reference Revenue Search-Revenue Panel Layout



6.132.3 Reference Revenue Search-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	This button allows the user to create a new Revenue record.	Button	N/A	0
Clear	This clears all fields so the user may key-in new search criteria.	Button	N/A	0
Description	This describes a specific accommodation or ancillary service.	Field	Character	70
Match criteria	Allows matching based on whether the description begins with or contains the requested characters.	Combo Box	Radio Button	0
Records	This drop down list displays the number of rows returned from the search.	Combo Box	Drop Down List Box	0
Revenue	This identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS.	Field	Number (Integer)	4
Search	This initiates search for the revenue matching the code/description keyed-in.	Button	N/A	0
Sounds-Like	If the box is checked, phonetic search is performed and if the check box is unchecked word search is performed.	Combo Box	Check Box	0

6.132.4 Reference Revenue Search-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	No rows found	Verify Keying. No records matching the description keyed-in were found.
Revenue	Field	1	No rows found	Verify Keying. No records matching the code keyed-in were found.

6.132.5 Reference Revenue Search-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.132.6 Reference Revenue Search-Revenue Panel Accessibility

6.132.6.1 To Access the Reference Search Revenue-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.

6.133 Reference Revenue Search Results-Revenue Panel

6.133.1 Reference Revenue Search Results-Revenue Panel Narrative

The Reference Revenue Search Results panel displays Revenue Codes matching the search criteria from Revenue search panel.

This panel is display only.

Navigation Path: [Reference] - [Revenue (Search)]- (click on [search] button)

6.133.2 Reference Revenue Search Results-Revenue Panel Layout

Search Results	
Revenue	Description
997	ADMISSION KITS
100	ALL INCL R&B/ANC
101	ALL INCL R&B
221	ADMIT CHARGE
240	ALL INCL ANCILLARY
249	ALL INCL/OTHER
924	ALLERGY TEST
929	ADDITIONAL DIAGNOSTIC SERVICES
945	ALCOHOL REHABILITATION
949	ADDITIONAL THERAPEUTIC SERVICES
546	AMBULANCE/NEONATAL
547	AMBULANCE, PHARMACY
548	AMBULANCE, TELEPHONE TRANSMISSION EKG
549	AMBULANCE/OTHER
571	AIDE/HM HLTH/VISIT
572	AIDE/HM HLTH/HOUR
540	AMBULANCE
541	AMBULANCE/SUPPLY
542	AMBULANCE/MEDICAL TRANSPORT
543	AMBULANCE/HEART MOBILE
1 2 Next >	

6.133.3 Reference Revenue Search Results-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	This describes a specific accommodation or ancillary service.	Field	Character	70
Revenue	This identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS.	Field	Number (Number)	4

6.133.4 Reference Revenue Search Results-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.133.5 Reference Revenue Search Results-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.133.6 Reference Revenue Search Results-Revenue Panel Accessibility

6.133.6.1 To Access the Reference Revenue Search Results-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Base Information .	Base Information-Revenue panel displays.

6.133.6.2 To Navigate the Revenue Reference Search Results-Revenue Panel

Step	Action	Response
1	Select row from data list.	Revenue Information and Maintenance panels display.

6.134 Revenue Information-Revenue Panel

6.134.1 Revenue Information-Revenue Panel Narrative

The Revenue Information panel is used to view revenue code data.

This panel is display only.

Navigation Path: [Reference] – [Revenue] - [search] - [(select row from search results)] - [Revenue Information]

6.134.2 Revenue Information-Revenue Panel Layout

Revenue Information	
Revenue	115
Effective Date	01/01/1964
Managed Care Service Class	NONE
Description	HOSPICE/PVT
End Date	12/31/2299

6.134.3 Revenue Information-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	This describes a specific accommodation or ancillary service.	Field	Character	70
Effective Date	The date of service the revenue code becomes effective.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the revenue code is no longer effective.	Field	Date (MM/DD/CCYY)	8
Managed Care Service Class	The service class indicates the type of services provided.	Combo Box	Drop Down List Box	0
Revenue	This identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS.	Field	Number (Integer)	4

6.134.4 Revenue Information-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.134.5 Revenue Information-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.134.6 Revenue Information-Revenue Panel Accessibility

6.134.6.1 To Access the Revenue Information-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information panel displays.

6.135 Revenue Maintenance-Revenue Panel

6.135.1 Revenue Maintenance-Revenue Panel Narrative

Revenue Maintenance-Revenue panel links to various Revenue information maintenance panels.

This panel is inquiry only.

Navigation Path: [Reference] - [Revenue (Search)] - (click on [search] button) - (select row from search results) - [Revenue Maintenance] - [Revenue]

6.135.2 Revenue Maintenance-Revenue Panel Layout

Revenue Maintenance Select an area to add or modify Prefs Top Bot ?

Revenue Maintenance Revenue

Base Information Benefit Plan Coverage Rules Contract Billing Rules
Flat Fee Group HCPCS Procedure Restriction
Note Reimbursement Rules

save cancel new

6.135.3 Revenue Maintenance-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Base Information	Link to the Base Information panel.	Hyperlink	N/A	0
Benefit Plan Coverage Rules	Link to the Benefit Plan Coverage Rules panel.	Hyperlink	N/A	0
Cancel	Cancels ('undo') any/all changes made to any/all panels under this navigation panel.	Button	N/A	0
Contract Billing Rules	Link to the Contract Billing Rules panel.	Hyperlink	N/A	0
Flat Fee	Link to the Flat Fee panel.	Hyperlink	N/A	0
Group	Link to the Group panel.	Hyperlink	N/A	0
HCPCS Procedure Restriction	Link to the HCPCS Procedure Restriction panel.	Hyperlink	N/A	0
New	Opens empty panels needed to create a new Revenue Code.	Button	N/A	0
Note	Link to the Note panel.	Hyperlink	N/A	0
Reimbursement Rules	Link to the Reimbursement Rules panel.	Hyperlink	N/A	0
Save	Saves any/all changes made to any/all panels under this navigation panel.	Button	N/A	0

6.135.4 Revenue Maintenance-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.135.5 Revenue Maintenance-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.135.6 Revenue Maintenance-Revenue Panel Accessibility

6.135.6.1 To Access the Revenue Maintenance-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Maintenance panel displays.

6.136 Revenue Mini Search-Revenue Panel

6.136.1 Revenue Mini Search-Revenue Panel Narrative

The Revenue Mini-Search allows search by Revenue Code from the Revenue Information page.

This panel is inquiry only.

Navigation Path: [Reference]- [Revenue] - [search] - [(select row from search results)] - [Next Search By]

6.136.2 Revenue Mini Search-Revenue Panel Layout



6.136.3 Revenue Mini Search-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Adv Search	Takes the user to main Revenue Search panel so user may set more advanced search criteria (Phonetic/word search).	Button	N/A	0
Clear	Clears the 'Revenue' field so user may enter new code for searching.	Button	N/A	0
Revenue	This identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS. This is the criteria used in the search.	Field	Number (Integer)	4
Search	Initiates search for a Revenue record matching the 'revenue code' keyed-in Revenue field.	Button	N/A	0

6.136.4 Revenue Mini Search-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Next Search By: Revenue	Field	1	No rows found	Enter a valid revenue code.

6.136.5 Revenue Mini Search-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.136.6 Revenue Mini Search-Revenue Panel Accessibility

6.136.6.1 To Access the Revenue Mini Search-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Mini Search-Revenue panel displays.

6.136.6.2 To Navigate the Revenue Mini Search-Revenue Panel

Step	Action	Response
1	Enter Revenue .	
2	Click Search .	Revenue Information and Maintenance panels display.

6.137 Base Information-Revenue Panel

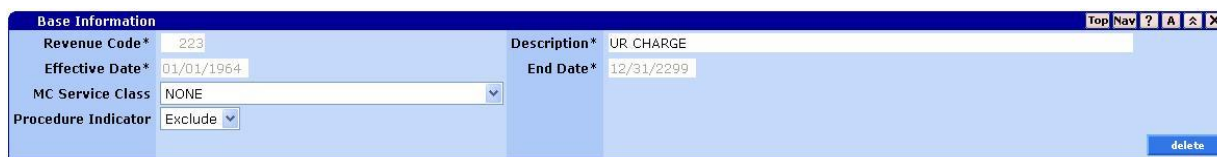
6.137.1 Base Information-Revenue Panel Narrative

The Revenue Code Base Information panel is used to update revenue code data.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue] - [search] - [(select row from search results)] - [Revenue Maintenance] - [Base Information]

6.137.2 Base Information-Revenue Panel Layout



6.137.3 Base Information-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Delete	Allows the user to mark the currently open Revenue record for deletion from Interchange.	Button	N/A	0
Description	This identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS.	Field	Character	70
Effective Date	The date of service the revenue code becomes effective.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the revenue code is no longer effective.	Field	Date (MM/DD/CCYY)	8
MC Service Class	The service class indicates the type of services provided.	Field	Drop Down List Box	0
Procedure Indicator	This field indicates whether the associated drug, revenue code, or procedure range is included or excluded from the billing restrictions for a provider.	Field	Drop Down List Box	0
Revenue Code	A code which identifies a specific accommodation or ancillary service. Revenue codes are determined by CMS.	Field	Number (Integer)	4

6.137.4 Base Information-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Description	Field	1	Description is required.	Key a description in the description field.
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an effective date that is less than or equal to the End Date.
	Field	3	Invalid Date.	Verify keying. The Effective Date must be keyed in numeric MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	5	Effective Date is required.	Verify keying. A date must be keyed in this field.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Verify keying. Ensure the end date is greater than or equal to the effective.
	Field	3	Invalid Date.	Verify keying. The End Date must be keyed in numeric MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	5	End Date is required.	Verify keying. A date must be keyed in this field.
Revenue Code	Field	1	Revenue code is required.	Enter a valid Revenue Code.
	Field	2	Revenue code must be greater than or equal to 1.	Enter a valid Revenue Code.
	Field	3	Revenue Code must be less than or equal to 9999.	Verify keying. Revenue Code can't exceed 9999.
	Field	4	Contains duplicates.	Verify keying. The revenue code you keyed is currently on the file.

6.137.5 Base Information-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.137.6 Base Information-Revenue Panel Accessibility

6.137.6.1 To Access the Base Information-Revenue Panel

Step	Action	Response
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Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Base Information .	Base Information-Revenue panel displays.

6.137.6.2 To Add on the Base Information-Revenue Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Enter Revenue Code .	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Select MC Service Class from drop down list box.	
5	Select Procedure Indicator from drop down list box.	
6	Enter Description .	
7	Enter End Date in MM/DD/CCYY format.	
8	Click Save .	Base Information-Revenue information is saved.

6.137.6.3 To Update on the Base Information-Revenue Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Base Information-Revenue information is saved.

6.137.6.4 To Delete on the Base Information-Revenue Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.138 Benefit Plan Coverage Rules-Revenue Panel

6.138.1 Benefit Plan Coverage Rules- Revenue Panel Narrative

The Benefit Plan Coverage Rules-Revenue panel is used to view the member plan coverage information for a specific revenue code.

This panel is display only.

Navigation Path: [Reference] – [Revenue] - (click on [search] and select row from search results) - [Revenue Maintenance] - [Revenue] - [Benefit Plan Coverage Rules]

6.138.2 Benefit Plan Coverage Rules-Revenue Panel Layout

Benefit Plan Coverage Rules										Top	Nav	?	⌕	✕
{Recipient} Plan	Description	Plan Type	Claim Type Edits	Financial Payer	Copay Allowed	Recipient Only	Effective Date	End Date						
ALIEN	Alien Emergency Services	Benefit Plan	None	Default	No	No	01/01/1960	12/31/2299						

6.138.3 Benefit Plan Coverage Rules-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Identifies the associated list of claim types as included or excluded for the covered benefit.	Combo Box	Drop Down List Box	0
Copay Allowed	Yes/No indicator used to identify programs that qualify for copay calculations during claims payment determination.	Field	Character	3
Description	Description of the Recipient Plan.	Field	Character	50
Effective Date	Date the Recipient Plan becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective date.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Recipient Plan becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this benefit plan.	Field	Character	30
Plan Type	Type of plan is either an Assignment Plan (ASGN) or a Benefit Plan (BNFT).	Field	Character	15
Recipient Only	Yes/No indicator used to identify programs that are used for recipient enrollment only. No services are covered by the program.	Field	Character	3
Recipient Plan	Code that identifies the recipient plan that is supported in the system.	Field	Character	5

6.138.4 Benefit Plan Coverage Rules-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.138.5 Benefit Plan Coverage Rules-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.138.6 Benefit Plan Coverage Rules-Revenue Panel Accessibility

6.138.6.1 To Access the Benefit Plan Coverage Rules- Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row.	Revenue Information and Maintenance panels display.
5	Click Benefit Plan Coverage Rules .	Benefit Plan Coverage Rules-Revenue panel displays.

6.139 Contract Billing Rules-Revenue Panel

6.139.1 Contract Billing Rules- Revenue Panel Narrative

The Contract Billing Rules- Revenue panel is used to display Provider Contracts applicable to revenue codes.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] - [Revenue] - (Click on [Search] button) - (Select row from search results) - [Revenue Maintenance] - [Revenue] - [Contract Billing Rules]

6.139.2 Contract Billing Rules-Revenue Panel Layout

Contract Billing Rules							Top	Nav	?	⌵	✕
Provider Contract	Financial Payer	Description	Claim Type Edits	Effective Date	End Date	Inactive Date					
LTC	Default	LTC Waiver		01/01/1960	12/31/2299	12/31/2299					
NET	Default	Non Emergency Trans		01/01/1960	12/31/2299	12/31/2299					
01/05/2006											
Open Coverage (No Restrictions)											
01/06/2006											

6.139.3 Contract Billing Rules-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Claim Type Edits	Attribute indicates what type of claim type to program editing is to be performed. If the indicator is set to 'N' (non), no claim type to program editing is performed. If the indicator is set to 'I' (include), only the claim types listed are billable for the specified program. If the indicator is set to 'E' (exclude), the claim types listed are not billable for the specified program.	Field	Character	1
Description	Description of the provider contract.	Field	Character	30
Effective Date	Date the Provider Contract becomes valid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the effective dates.	Field	Date (MM/DD/CCYY)	8
End Date	Date the Provider Contract becomes invalid for use in claims processing. The claim FDOS/TDOS date span is used when comparing the End Date.	Field	Date (MM/DD/CCYY)	8
Financial Payer	Financial Payer for this provider contract.	Field	Character	30
Inactive Date	Date/Time the Provider Contract can no longer be used regardless of dates of service on the claim.	Field	Date (MM/DD/CCYY)	8
Provider Contract	Classification of services a Provider can bill. A provider may have multiple contracts.	Field	Character	5

6.139.4 Contract Billing Rules-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.139.5 Contract Billing Rules-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.139.6 Contract Billing Rules-Revenue Panel Accessibility

6.139.6.1 To Access the Contract Billing Rules-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row.	Revenue Information and Maintenance panels display.
5	Click Contract Billing Rules .	Contract Billing Rules panel displays.

6.140 Flat Fee-Revenue Panel

6.140.1 Flat Fee-Revenue Panel Narrative

The Revenue Flat Fee panel is used to view or update specific revenue codes that have a different reimbursement rate based on emergency status. By clicking on the add button the user can add a new date segment or modify the existing one. Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue] - (click on [search] and select row from search results) - [Revenue Maintenance] - [Revenue] - [Flat Fee]

6.140.2 Flat Fee-Revenue Panel Layout

Emergency Code	EffectiveDate	EndDate	Flat Fee Amount	Rate Type
Emergency	01/01/2005	12/31/2005	\$31.00	MLP Mid Level Pract
Emergency	01/01/2006	12/31/2006	\$500.00	LEA Local Educ Agency
Emergency	01/01/2001	12/31/2001	\$1,000.00	LB1 Laura 1 Test Rates

Select row above to update -or- click Add button below.

Emergency Code: Flat Fee Amount:
Effective Date: Rate Type:
End Date:

6.140.3 Flat Fee-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows user to add a new 'Flat Fee' for this Revenue Code.	Button	N/A	0
Delete	Allows user to mark an existing flat fee structure to be removed from the Revenue Code.	Button	N/A	0
Effective Date	The date of service the emergency rate is effective for claims processing.	Field	Date (MM/DD/CCYY)	8
Emergency Code	A value that denotes if pricing should be computed at the emergency or non-emergency rate.	Combo Box	Drop Down List Box	0
End Date	The date of service the emergency rate is no longer effective for claims processing.	Field	Date (MM/DD/CCYY)	8
Flat Fee Amount	The amount determined to be the flat fee. Format is 9999999.99.	Field	Number (Decimal)	9
Rate Type	The description of the rate type used in determining provider reimbursement.	Combo Box	Drop Down List Box	0

6.140.4 Flat Fee-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an End Date that is greater than or equal to the Effective Date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Verify dates with the data list. Date segments cannot overlap.
	Field	3	Invalid Date.	Enter an Effective Date that is umeric and in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Enter an Effective Date that is more recent than 01/01/1900.
	Field	5	Effective date is required.	Enter an Effective Date.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Enter an Effective Date that is less than or equal to 12/31/2299.
Emergency Code	Field	1	Emergency Code is required.	Select an Emergency Code from the drop down list.
	Field	2	Revenue Flat Fee Segments may not overlap for the same Emergency Code and Rate Type.	Verify data. Emergency code line item must not overlap with existing line item.
End Date	Field	1	Effective Date must be less than or equal to End Date.	Enter an End Date that is after the Effective Date.
	Field	2	The fields Effective Date and End Date from row cannot overlap with row.	Enter an End Date range that does not overlap an existing segment.
	Field	3	Invalid Date.	Enter an End Date that is numeric and in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Enter an End Date that is more recent than 01/01/1900.
	Field	5	End Date is required.	Enter an End Date.
	Field	6	End Date must be less than or equal to 12/31/2299.	Enter an End Date that is less than or equal to 12/31/2299.
Flat Fee Amount	Field	1	Flat Fee Amount is required.	Enter the amount for the Flat Fee.
	Field	2	Flat Fee Amount must be greater than or equal to 0.01.	Enter a Flat Fee that is numeric field greater than or equal to 0.

Field	Field Type	Error Code	Error Message	To Correct
	Field	3	Flat Fee Amount must be less than or equal to 9999999.99.	Enter a Flat Fee amount cannot exceed 9,999,999.99.
	Field	4	Enter a valid value.	Enter a Flat Fee that is a numeric field.
	Field	5	Revenue Flat Fee Segments may not overlap for the same Emergency Code and Rate Type.	Cannot enter a duplicate record.
Rate Type	Field	1	A valid Rate Type is required.	Select a Rate Type from the drop down list.

6.140.5 Flat Fee-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.140.6 Flat Fee-Revenue Panel Accessibility

6.140.6.1 To Access the Flat Fee-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Flat Fee .	Flat Fee-Revenue panel displays.

6.140.6.2 To Add on the Flat Fee-Revenue Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Select Emergency Code from drop down list box.	
3	Enter Effective Date in MM/DD/CCYY format.	
4	Enter End Date in MM/DD/CCYY format.	
5	Enter Flat Fee Amount .	
6	Select Rate Type from drop down list box.	
7	Click Save .	Flat Fee-Revenue information is saved.

6.140.6.3 To Update on the Flat Fee-Revenue Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Flat Fee-Revenue information is saved.

6.140.6.4 To Delete on the Flat Fee-Revenue Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.141 Group-Revenue Panel

6.141.1 Group-Revenue Panel Narrative

The Revenue Group panel is used to view revenue groups a specific revenue code is part of.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue] - [search] - [(select row from search results)] - [Revenue Maintenance] - [Group]

6.141.2 Group-Revenue Panel Layout

Group					
Revenue Group Type	Description	Revenue From	Code To	Effective Date	End Date
17	Accommodation	110	110	01/01/1900	12/31/2299
22	Inpatient Accommodation	110	110	01/01/1900	12/31/2299
30	Medicare A Covered	110	110	01/01/1900	06/12/2002
33	Private Room Accommodationsdfdfdsdfdsfd	110	110	01/01/1900	12/31/2299
36	PAS Inpatient	110	110	01/01/1900	12/31/2299
40	1 bed psych	110	110	01/01/1900	12/31/2299
1002	Outpatient Routine Care	110	179	01/01/1900	12/31/2299
1003	Accommodation	101	179	01/01/1900	12/31/2299

6.141.3 Group-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Description	The description of the revenue group.	Field	Character	50
Effective Date	The date of service the revenue code becomes effective for the revenue group.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the revenue code is no longer effective for the revenue group.	Field	Date (MM/DD/CCYY)	8
Revenue Code (From)	The lower limit of the revenue code range associated to a group.	Field	Number (Integer)	4
Revenue Code (To)	The upper limit of the revenue code range associated to a group.	Field	Number (Integer)	4
Revenue Group Type	A code that categorizes a revenue code into a particular group.	Field	Number (Integer)	9

6.141.4 Group-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.141.5 Group-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.141.6 Group-Revenue Panel Accessibility

6.141.6.1 To Access the Group -Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Group .	Group-Revenue panel displays.

6.142 HCPCS Procedure Restriction-Revenue Panel

6.142.1 HCPCS Procedure Restriction-Revenue Panel Narrative

The Revenue-HCPCS Procedure Restriction panel is used to update Procedure Codes that are valid/invalid for specific revenue codes. Valid/Invalid (Include/Exclude) indicator is maintained at the Revenue Code level (Base Information panel).

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue] - [search] - [(select row from search results)] - [Revenue Maintenance] - [HCPCS Procedure Restriction]

6.142.2 HCPCS Procedure Restriction-Revenue Panel Layout

6.142.3 HCPCS Procedure Restriction-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows the user to set up a new Procedure Restriction for this Revenue Code.	Button	N/A	0
Delete	Allows the user to mark an existing Procedure Restriction to be removed from this Revenue Code.	Button	N/A	0
Effective Date	The date of service the revenue code/HCPCS Procedure Code Restriction becomes active for claims processing.	Field	Date (MM/DD/CCYY)	8
End Date	The date of service the revenue code/HCPCS Procedure Code Restriction is no longer active for claims processing.	Field	Date (MM/DD/CCYY)	8
Include/Exclude	This is a datalist display only field. Indicates whether the Procedure Code is valid/invalid for this Revenue Code. This field is maintained at the Revenue Code level on Base Information panel.	Field	Character	7
Procedure Code [Search]	The HCPCS Procedure Code that applies to the Revenue Code Restriction.	Hyperlink	N/A	0

Field	Description	Field Type	Data Type	Length
Procedure Description	The description of the HCPCS Procedure Code.	Field	Character	40

6.142.4 HCPCS Procedure Restriction-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Effective Date	Field	3	Invalid Date.	Verify keying. The Effective Date must be keyed in MM/DD/CCYY format.
	Field	4	Effective Date must be greater than or equal to 01/01/1900.	Verify keying. Date must be more recent than 01/01/1900.
	Field	5	Effective Date is required.	Verify entry. An Effective Date is required for this field.
	Field	6	Effective Date must be less than or equal to 12/31/2299.	Verify keying. Date must be less than or equal to 12/31/2299.
End Date	Field	3	Invalid Date.	Verify keying. The End Date must be keyed in MM/DD/CCYY format.
	Field	4	End Date must be greater than or equal to 01/01/1900.	Verify keying. The End Date must be more recent than 01/01/1900.
	Field	5	End Date is required.	Verify entry. An End Date is required for this field.
	Field	6	End Date must be less than or equal to 12/31/2299.	Verify keying. End Date must be less than or equal to 12/31/2299.
Procedure Code	Hyperlink	1	A valid Procedure Code is required.	Entry is required for this field. Select a Procedure Code using the Search link.
	Hyperlink	2	A duplicate record cannot be saved.	Procedure Code is already used for this Revenue. Enter a non duplicated Procedure Code.

6.142.5 HCPCS Procedure Restriction-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.142.6 HCPCS Procedure Restriction-Revenue Panel Accessibility

6.142.6.1 To Access the HCPCS Procedure Restriction-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click HCPCS Procedure Restriction .	HCPCS Procedure Restriction-Revenue panel displays.

6.142.6.2 To Add on the HCPCS Procedure Restriction-Revenue Panel

Step	Action	Response
1	Click Add .	Activates fields for entry of data or selection from lists.
2	Click [Search] to locate Procedure Code .	Procedure Code Search panel displays.
3	Enter search criteria or select row from list of results.	Procedure Code and Description information is populated on panel.
4	Enter Effective Date in MM/DD/CCYY format.	
5	Enter End Date in MM/DD/CCYY format.	
6	Click Save .	HCPCS Procedure Restriction-Revenue information is saved.

6.142.6.3 To Update on the HCPCS Procedure Restriction-Revenue Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	HCPCS Procedure Restriction-Revenue information is saved.

6.142.6.4 To Delete on the HCPCS Procedure Restriction-Revenue Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.143 Note-Revenue Panel

6.143.1 Note-Revenue Panel Narrative

The Note panel is used to enter notes as to why changes were made to a specific Revenue code. Includes fields for date, time, clerk number and note sequence number.

Only authorized users are allowed to perform maintenance tasks.

Navigation Path: [Reference] – [Revenue Search] - [(Add button) OR (select row from search results)] - [Note]

6.143.2 Note-Revenue Panel Layout

The screenshot shows a web application window titled "Note". At the top, there is a table with the following columns: "Sequence Number", "Clerk ID", "Date", "Time", and "Note". The first row of the table contains the values: "1", "CZVTPC", "02/07/2006", "17:06:26", and "first note". Below the table, there is a message: "Select row above to update -or- click Add button below.". Underneath the message, there are four input fields: "Sequence Number", "Clerk ID", "Date", and "Time". A large text area for the "Note" is located below these fields. At the bottom right of the window, there are two buttons: "delete" and "add".

6.143.3 Note-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Add	Allows a user to add a note.	Button	N/A	0
Clerk ID	Identification of the user who enters the note. This value is set from the user's security profile.	Field	Character	8
Date	The date that the note was entered.	Field	Date (MM/DD/CCYY)	8
Delete	Allows a user to delete a note.	Button	N/A	0
Note	The actual text of the note.	Field	Character	1000
Sequence Number	Sequence number than can uniquely identify a note.	Field	Number (Integer)	9
Time	The time that the note was entered.	Field	Number (Decimal)	6

6.143.4 Note-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
Note	Field	1	Note is required.	Add Revenue Code Note text.

6.143.5 Note-Revenue Panel Extra Features

Only the notes field is user enterable, all other fields are auto populated as follows:

Sequence Number - Max sequence number for Proc + 1

Clerk ID - System generated based on users login id

Date - System Date (When Saved)

Time - System Time (When Saved)

6.143.6 Note-Revenue Panel Accessibility

6.143.6.1 To Access the Note-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Note .	Note-Revenue panel displays.

6.143.6.2 To Add on the Note-Revenue Panel

Step	Action	Response
1	Click Add . Sequence Number, Date and Time automatically populate.	Activates fields for entry of data or selection from lists.
2	Enter Note .	
3	Click Save .	Note-Revenue information is saved.

6.143.6.3 To Update on the Note Revenue Panel

Step	Action	Response
1	Click to highlight the row to be updated.	Data is populated in fields.
2	Click in desired field to update and perform update.	
3	Click Save .	Note-Revenue information is saved.

6.143.6.4 To Delete on the Note-Revenue Panel

Step	Action	Response
1	Click line item to be deleted.	Fields are populated with data related to the line selected.
2	Click Delete .	Line item is deleted.

6.144 Reimbursement Rules-Revenue

6.144.1 Reimbursement Rules-Revenue Panel Narrative

The Reimbursement Rules-Revenue panel is used to view the Reimbursement Agreement information for a specific revenue code. The information displayed is retrieved from the Reimbursement Agreement tables available through the Benefit administration panels. The panel displays all reimbursement agreements associated with the specified Revenue code.

This panel is display only.

Navigation Path: [Reference] – [Revenue] - [(select row from search results)] - [Reimbursement Rules]

6.144.2 Reimbursement Rules-Revenue Panel Layout

Reimbursement Rules										
Rule	Claim Type	Modifier	Part Prov Type/Spec-Primary	Current Perform Provider Contract	Current Benefit Plan	Bill Prov Type/Spec-Primary	Pricing Indicator	Rule Type	Adjustment Factor	Greater Than Billed
5050	B		11/111, 11/118		(QONLY, XHQ)		COPDCL	DEF		Y
5049	B		11/111, 11/118, 26/000		(QONLY, XHQ)		COPDCL	DEF		Y
5052	B		26/000		(QONLY, XHQ)		PTSDT2	DEF		Y
5051	B		(11/111, 11/118, 26/000)				PTSDT2	DEF		Y
3114	C					11/111, 11/118	COPDCL	DEF		Y
3115	C					(11/111, 11/118)	PTSDT2	DEF		Y
58025	H	(TC) 0-4		(PRACT)			NORMAL	DEF		Y
58017	H	(TC) 0-4		PRACT			NORMAL	DEF		Y
62483	H	TC 1:1 and all allowed, 0:3		(PRACT)			HAFEE	DEF	(80% 80 Below Fraction(4))	
61786	O						HAFEE	TC		

Reimbursement Rules										
Rule	Claim Type	Modifier	Part Prov Type/Spec-Primary	Current Perform Provider Contract	Current Benefit Plan	Bill Prov Type/Spec-Primary	Pricing Indicator	Rule Type	Adjustment Factor	Greater Than Billed
5050	B		11/111, 11/118		(QONLY, XHQ)		COPDCL	DEF		Y
5049	B		11/111, 11/118, 26/000		(QONLY, XHQ)		COPDCL	DEF		Y
5052	B		26/000		(QONLY, XHQ)		PTSDT2	DEF		Y
5051	B		(11/111, 11/118, 26/000)				PTSDT2	DEF		Y
3114	C					01/000, 11/000	PTSDT2	DEF		Y
3115	C					(01/000, 11/000)	PTSDT2	DEF		Y
58025	H	(TC) 0-4		(PRACT)			NORMAL	DEF		Y
58017	H	(TC) 0-4		PRACT			NORMAL	DEF		Y
62483	H	TC 1:1 and all allowed, 0:3		(PRACT)			HAFEE	DEF	(80% 80 Below Fraction(4))	
61786	O						HAFEE	TC		

6.144.3 Reimbursement Rules-Revenue Panel Field Descriptions

Field	Description	Field Type	Data Type	Length
Bill Prov Type/Spec-Primary	It provides the Billing Provider Type/Specialty value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included.	Field	N/A	0
Claim Type	It provides the Claim Type values that are to be included for this rule. The possible Claim Type values are those that pulled from the Codes-Claim Type panel.	Field	N/A	0

Field	Description	Field Type	Data Type	Length
Current Benefit Plan	It provides the Current Benefit Plan value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included. The possible Benefit Plan values are on the Recipient Plan-Benefit Administration panel.	Field	N/A	0
Dates	These are the effective and end dates for this rule.	Field	Date (MM/DD/CCYY)	8
Greater Than Billed	Indicates if the amount is greater than what was billed.	Field	Character	3
Perf Prov Type/Spec Primary	It provides the Performing Provider Type/Specialty value(s) that are to be included or excluded from this rule. If the values are in parenthesis they are to be excluded. If there are values with no parenthesis they are to be included.	Field	N/A	0
Pricing Indicator	Indicates if there is a pricing indicator selected for this rule.	Field	N/A	0
Pricing Modifier	Pricing Modifier requirement for claims. Possible values are N - Pay Billed Amount, Y - Pay greater than Billed Amount & Z - Zero Pay Billed Amount.	Field	N/A	0
Rate Type	Indicates what type of Rate Type is selected for this rule. The Rate Type values are those found on the Codes-Rate Type panel.	Field	N/A	0
Rule	It provides the Rule identification.	Field	N/A	0

6.144.4 Reimbursement Rules-Revenue Panel Field Edits

Field	Field Type	Error Code	Error Message	To Correct
No field edits found for this panel.				

6.144.5 Reimbursement Rules-Revenue Panel Extra Features

Field	Field Type
No extra features found for this panel.	

6.144.6 Reimbursement Rules-Revenue Panel Accessibility

6.144.6.1 To Access the Reimbursement Rules-Revenue Panel

Step	Action	Response
1	Enter User Name and Password ; Click Login .	Main Menu page displays.
2	Point to Reference and click Revenue .	Reference Revenue Search panel displays.
3	Click Search .	Reference Revenue Search Results panel displays.
4	Select row from data list.	Revenue Information and Maintenance panels display.
5	Click Reimbursement Rules .	Reimbursement Rules-Revenue panel displays.